

7439.
ack 4.
SOMERSET COUNTY COUNCIL



REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1966

A. PARRY JONES,

M.B., B.CH., D.P.H.

County Medical Officer of Health.

PRINCIPAL CONTENTS

Staff	2
Vital Statistics	4
Comment on Vital Statistics	5
Ambulance Service	37
Camping and Caravan Sites	67
Chiropody	41
Home Help Service	22
Housing	61
Ice-Cream	76
Infectious and Other Diseases - Prevention of, and Control over	6
Maternal and Child Welfare	7
Mental Health Services	42
Milk-in-Schools Scheme	76
Nursing Services	17
Sanitary Circumstances	65
School Meals Service	76
School Swimming Pools	68
Sewage Disposal	53
Smoke Act, 1965	77
Supervision over the Food Supply	70
Vaccination and Immunisation	26
Water Supplies	47



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30112084>

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE
OF THE SOMERSET COUNTY COUNCIL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1966 on the Public Health Services of Somerset.

The general standard of health and wellbeing of the people of Somerset continues at a high level and there have been no serious outbreaks of infectious disease. The vital statistics for the Administrative County once again compare favourably with those for England and Wales and the continuing improvement in recent years is gratifying.

Again I must pay tribute to the valuable assistance given to your services by many voluntary associations and individuals. Such voluntary help has long been a feature in this County and despite the many official provisions today, this help is still greatly required. The Mental Health Services in particular has been most fortunate to receive large sums of money from the voluntary associations for the building and extension of Training Centres. These gifts have been indispensable to your overcrowded Centres as no capital monies for mental health building have been forthcoming from the Central Government during the year.

I would thank the staff of the Department for continuing to give devoted service and, in particular, the senior officers and section heads who have contributed the detail in their respective sections for this Report.

Finally, I wish to acknowledge the help we have received from other Departments of the County Council and from the hospitals and general practitioners in the County.

I am,

Yours faithfully,

A. PARRY JONES,

County Medical Officer of Health.

County Hall,
Taunton.

July, 1967.

STAFF

The following are the Senior Public Health Officers:—

CENTRAL OFFICE STAFF :

County Medical Officer of Health :

Principal School Medical Officer :

A. PARRY JONES, M.B., B.Ch., D.P.H.

Deputy County Medical Officer of Health :

Deputy Principal School Medical Officer :

A. R. BUCHAN, M.D., B.S., D.P.H.

Senior Medical Officer for Maternal and Child Welfare :

B. MARY THOMPSON, M.D., B.S., D.P.H.

Assistant County Medical Officer :

W. MARGARET BOND, M.B., B.S., D.C.H., D.Obst. R.C.O.G.

Chief Dental Officer :

QUENTIN A. DAVIES, L.D.S., R.C.S. (Eng.)

County Public Analyst :

JOAN D. PEDEN, B.Sc., F.R.I.C.

County Health Inspector :

C. E. WATERFALL, M.I.P.H.E., M.A.P.H.I.

Principal Administrative Officer :

R. F. COTTRELL, D.P.A.

County Ambulance Officer :

R. S. J. BISHOP, D.P.A., F.I.A.O.

Mental Health Officer :

A. H. EDWARDS, M.B.E., D.P.A., F.C.C.S.

County Nursing Officer :

MISS F. E. HOUGHTON, S.R.N., S.C.M., H.V., Q.N.

Home Help Organiser :

MISS L. C. E. CHALK, M.I.H.H.O.

AREA STAFF :

- | | |
|---|--|
| P. P. FOX, M.B., Ch.B., D.P.H. | <i>Area Medical Officer to Combined Area 'D' (Yeovil Borough, Yeovil Rural and Wincanton Rural Districts).</i> |
| D. MCGOWAN, M.B., Ch.B., D.P.H. | <i>Area Medical Officer to Combined Area 'H' (Weston-super-Mare Borough and Axbridge Rural District).</i> |
| H. MORRISON, M.B., Ch.B., D.P.H. | <i>Area Medical Officer to Combined Area 'L' (Taunton Borough, Taunton Rural, Wellington Urban and Wellington Rural Districts).</i> |
| N. NEWMAN, M.B., Ch.B., D.P.H. | <i>Area Medical Officer to Combined Area 'E' (Frome Urban and Rural, Bathavon Rural, Keynsham Urban, Clutton Rural and Norton-Radstock Urban Districts).</i> |
| R. H. WATSON, M.B., Ch.B., B.A.O., D.P.H. | <i>Area Medical Officer to Combined Area 'J' (Bridgwater Borough, Bridgwater Rural and Burnham-on-Sea Urban Districts).</i> |

A. M. McCALL, M.R.C.S., L.R.C.P.
S.P.H.

Area Medical Officer to Combined Area 'A' (Chard Borough, Ilminster Urban, Crewkerne Urban, Langport and Chard Rural Districts).

D. E. CLARE, M.B., B.S., D.P.H.

Area Medical Officer to Combined Area 'C' (Shepton Mallet Urban and Rural, Wells City, Wells Rural, Street Urban District and Glastonbury Borough).

VALERIE N. BAKER, M.B.,
Ch.B., D.R.C.O.G., D.P.H.

Area Medical Officer to Combined Area 'G' (Clevedon Urban, Long Ashton and Portishead Urban Districts).

COMMITTEES

The following are concerned in matters of public health:—

HEALTH COMMITTEE : and its Sub-Committees for : Midwifery and Nursing Services, Ambulance Service, Water Supplies and Sewage Disposal, Mental Health Services, and Milk.

SUMMARY OF VITAL STATISTICS

Area (in acres) :	...	...	...	...	...	1,024,971
Population (1966) :	...	...	...	...	...	555,690
Live Births —						
Number :	9,194	Rate per 1,000 population :	...			16.55
Illegitimate Live Births —						
Number :	567	Rate per cent of total live births :...				6.17
Stillbirths —						
Number :	130	Rate per 1,000 live and still births :				13.94
Total Live and Stillbirths —						
Number :	9,324	Rate per 1,000 population :	...			16.74
Infant Deaths (deaths under 1 year) :	...	...	...	...		139
Infant Mortality Rates —						
Total Infant deaths (139) per 1,000 total live births :						15.12
Legitimate Infant deaths (131) per 1,000 legitimate live births :	...	...	...	...		15.18
Illegitimate Infant deaths (8) per 1,000 illegitimate live births :	...	...	...	...		14.11
Neo-natal Mortality Rate (deaths under 4 weeks) (99) per 1,000 total live births :						10.76
Early Neo-natal Mortality Rate (deaths under 1 week) (82) per 1,000 total live births :	...	...	...	...	...	8.92
Peri-natal Mortality Rate (stillbirths and deaths under 1 week combined) (212) per 1,000 total live and stillbirths :	...	...				22.74
Maternal Mortality (including abortion) (1) per 1,000 total live and stillbirths :						0.11

COMMENT ON VITAL STATISTICS REGISTRAR GENERAL'S FIGURES

BIRTHS: for a second year the total number of births has shown a very small fall from 9,346 to 9,324, although the county population by mid-1966 had increased by another 6,370.

Live births fell by 11 with a consequent small drop in the birth rate from 16.76 to 16.5. The national birth rate also fell from 18.1 to 17.7.

Still births showed a considerable and very welcome drop from 141 to 130 giving a rate change from 15.1 to 13.9 — the lowest ever achieved. The rate for England and Wales is also down but only to 15.4.

Sex distribution in both legitimate and illegitimate live births this year showed the expected excess of males over females has returned. (4,114 to 4,513 and 268 to 299), although the ratio is reversed on the still births.

Illegitimate births unhappily continue to rise, with a total of 575 compared with 546 in 1965. The illegitimate rate for Somerset rose from 5.9 to 6.2 % of total births which is still well below the national rate of 7.7 in 1965.

DEATHS

Infant mortality

Deaths in the first year fell from 159 to 139 with rates of 17.3 and 15.1. This still compares favourably with the national rate of 19.0 the lowest yet reached.

Deaths in the first week show little variation, with a rate change from 9.2 to 8.9 (England and Wales 11.1). A fall in deaths from respiratory disease has been balanced by a rise in early deaths due to congenital malformations.

Deaths in the first month (neo-natal deaths) are unchanged in number and distribution, with the rate of 10.8 which is still below the national rate of 12.9.

Peri-natal deaths

This total of deaths before birth (stillbirths) and in the first week of life is an indication of the baby's success in weathering pregnancy and birth. The figure continues to fall steadily (from 226 to 212) and the rate similarly dropped from 24.2 to 22.7. The national rate is still well above this at 26.3.

Deaths from 1 — 5 years

Children dying in these four years totalled 26 — comparable in number and distribution with 1965.

Maternal Deaths

The Registrar General records one maternal death occurring during labour from a condition which at present is virtually untreatable. One other death associated with pregnancy is recorded of a mother dying from heart disease after a premature labour. The rate of 0.11 compares favourably with that of 0.26 for England and Wales (0.2 without abortions). No deaths from abortion (therapeutic or criminal) were recorded in Somerset but 54 occurred in the national figures — out of a total of 223 maternal deaths.

PREVENTION OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Table 6 gives details of notified cases of infectious diseases and their distribution, with comparative figures for the previous year.

POLIOMYELITIS. The confirmed cases numbered 2 compared with 1 in 1965 and none in 1964.

VENEREAL DISEASE

Centre	NEW CASES			Increase or Decrease during 1966
	1964	NEW CASES	1966	
Bath	10 (77)	11 (63)	5 (43)	- 6 (- 20)
Bridgwater	6 (26)	2 (30)	11 (29)	+ 9 (- 1)
Bristol	17(103)	21(104)	34(118)	+13 (+ 14)
Taunton	4 (37)	9 (57)	45 (57)	+36
Weston-super-Mare	6 (38)	12 (39)	9 (43)	- 3 (+ 4)
Yeovil	5 (27)	6 (47)	3 (41)	- 3 (- 6)
All Clinics	48(308)	61(340)	107(331)	+ 46 (- 9)

The figures shown in brackets are the numbers of new cases suffering from 'other conditions' and conditions undiagnosed at 31st December, 1966.

MATERNAL AND CHILD WELFARE

ANTE-NATAL CARE

As a result of the development of attachment schemes between the public health domiciliary staff and general practitioners, more joint ante-natal clinics are being held in doctor's own surgeries. This is often the most satisfactory method of providing ante-natal care and is excellent for the doctor and midwife as well as for the patient.

The five blood-taking clinics at Bridgwater, Chard, Crewkerne, Glastonbury and Yeovil, have continued, the total attendances being 1,929, a decrease of 360 from the previous year. Quite a number of doctors now undertake this investigation for their own patients instead of referring them to the county centres.

PARENTCRAFT AND RELAXATION CLASSES

During the year new Centres were opened at Evercreech and North Petherton, and the centres at Shepton Mallet and Ilchester were closed temporarily. St. Martin's Hospital, Bath, is planning classes for hospital-booked patients. Butleigh, Paulton and Musgrove Park Hospitals already provide similar classes. Local authority parentcraft and relaxation classes are now provided at 30 places in the County and Somerset mothers in the North of the County can also go to the classes in Bristol or Bath if they find it more convenient. During 1966, the classes in Somerset were attended by 1,878 women (mostly those expecting their first babies) and a total of 10,478 attendances were made. These were decreases of 334 and 820 respectively from the previous year.

For the second year running a very successful three-day parentcraft and relaxation course was held in October, this year at the Regional Hospital Board Training Centre, Lyngford House, Taunton, and included for the first time physiotherapists and hospital midwives as well as County staff. This innovation made the course doubly useful since most mothers attending classes are in fact confined in hospital.

BIRTHS

The locally collected figures indicate that there were 9,086 live births to Somerset mothers during 1966. This was an increase of 4 over the previous year. Total births actually fell from 9,229 to 9,220.

There were 68 sets of twins born during the year.

Of the total births during 1966, 1,889 (20%) took place at home. There has been a decrease of 210 in the home deliveries with a corresponding increase in the number of cases delivered in hospitals; of these more than previously were discharge early, and attended by domiciliary midwives before the tenth day. The 1966 figure of 2,111 early discharges after 7,331 births shows an increase of 254 over the previous year and is 29% of all hospital deliveries. One in six of all patients delivered in hospital returned home in the first 48 hours.

Delivery outside an obstetric unit, either at home or in a general practitioner maternity unit, is safe if there are adequate arrangements for help for doctor and midwife in emergency. South Somerset is fortunate in having excellent resuscitation services available through the "flying squad" for mothers or for premature babies, as is also the north-west of the county in the Bristol Clinical area. It is encouraging that the provision in the Bath Clinical area is likely to improve this year in both fields.

CONGENITAL DEFECTS

Notification of congenital defects has continued in accordance with the Ministry of Health Scheme, 187 infants in 1966 having been reported to have abnormalities at birth compared with 172 in 1965 and 211 in 1964. There has not been any significant increase in any particular type of abnormality noted in 1966. Of the defects recorded, the greatest number is for limbs (including dislocation of hip and club foot), followed by defects of the brain and spinal cord.

It is probable that the larger number of abnormalities recorded in the first year were due to very minor defects not now reported. Medical confirmation of the condition before notification saves time in ensuring early accurate classification. I am grateful for the co-operation of doctors and midwives who help in giving prompt and accurate details of these abnormalities, enabling this scheme to work smoothly.

UNDERWEIGHT BABIES

The table below shows the number of babies, live and stillborn, in this group and demonstrates the remarkably steady rate, when many other rates show the effects of social change or medical progress.

Somerset has a lower rate than England and Wales and also than the South-West, although the reasons for this are not known. The Nuffield Provincial Hospital Trust has invited Dr. Brimblecombe, Consultant Paediatrician and Dr. Ashford and Dr. Fryer of the University of Exeter to undertake retrospective research into the biology of low birth weight and the significance of low birth weight in the problem of perinatal mortality. As part of the research an analysis of information contained in the birth records of children under the age of 5 years in the South West of England will be carried out and we have agreed to assist them in this work.

TABLE I
Births of underweight babies in Somerset – 1962–66 (locally collected figures)

YEAR	All L.B.	U.W. L.B.	% of L.B.	All S.B.	U.W. S.B.	% U.W. S.B.	Total Births	Total U.W.B.	% of Total Births
1962	8,534	481	5.6	157	86	55.0	8,691	567	6.5
1963	8,748	478	5.4	140	87	62.0	8,888	565	6.3
1964	9,129	501	5.4	147	77	52.3	9,276	578	6.2
1965	9,082	514	5.6	147	73	49.7	9,229	587	6.4
1966	9,086	504	5.5	134	84	62.7	9,220	588	6.4

The loss of life among live-born underweight babies has been reduced by improved care and this is demonstrated by the improved survival rates.

TABLE II
Survival rates for underweight babies at 28 days
SOMERSET 1958-66

YEAR	Premature Live Births	Survival at 28 days	Survival rate %
1958	429	369	72.2
1959	468	412	76.4
1960	463	407	87.9
1961	470	434	79.8
1962	481	429	88.6
1963	478	436	91.0
1964	501	458	91.6
1965	514	463	90.1
1966	504	457	90.6

The contribution of this group to perinatal deaths is however still considerable, with rates ten times those for all births. Until the number of premature deliveries and the causes of poor development before birth can be reduced progress in lowering the rate will be slow.

Neonatal and perinatal death rates for all births, and all underweight births compared
SOMERSET 1963-66

Neonatal death rate		
	All Births	U.W. Births
1963	10.9	99.0
1964	8.9	85.8
1965	10.7	99.2
1966	10.8	73.4

Perinatal death rate	
All Births	U.W. Births
24.1	238.7
22.4	205.9
24.2	206.1
22.7	217.2

ILLEGITIMACY

There were eight cases of pregnancy recorded among girls still at school, aged between $14\frac{3}{4}$ and $18\frac{1}{4}$, and seven of these went to term. Of these seven babies, four went to adopting homes, one to a long-term foster-home with hope of adoption and two were kept with hopes of marriage to the young father later. Help was given by the Education Department with home tuition during exclusion from school and in appropriate cases with resettlement in the same or another school afterwards.

Cases helped by the social workers of the Somerset Moral Welfare Association, for which a grant was paid by the County Council, increased from 343 to 420.

MOTHER AND BABY HOMES

Admissions to the County Home at Braeside, Chard, were on much the same level as before, 23 girls being accommodated ante-natally and two post-natally. In cases where Braeside is fully booked, or is not suitable, as for a girl with connections in the Chard area or for one who is very young or who requires a particular kind of help, use is made of the Homes in adjacent Counties run by various religious denominations. The number of cases assisted in these out County Homes was 54, instead of the 26 in 1965.

CHILD WELFARE CENTRES AND H.V. CENTRES

During the year a new centre was opened at Creech St. Michael to meet the needs of a growing population.

At the end of 1966, there were 114 Child Welfare and 30 Health Visitor Centres providing a total of 3,255 sessions during the year, an increase of 20 over the previous year. At 2,357 of these sessions, doctors were in attendance, either Assistant County Medical Officers or General Practitioners, and other doctors employed on a sessional basis. A total of 20,999 children attended the child welfare and health visitors centres during the year, and of these 6,212 were babies born in 1966, which is nearly 70% of the total Somerset births.

There has been some fall in the numbers of children of all age groups attending during the past year, although over a period of ten years there has been a steady rise:-

Year	Number of children attending			TOTAL
	Under 1	1 - 2 years	2 - 5 years	
1966	6,212	6,190	8,597	20,999
1965	6,405	6,425	8,642	21,472
1961	4,820	4,995	6,314	16,129
1956	3,810	3,983	5,846	13,639

Part of the drop may be accounted for by the introduction of attachment schemes. Some practice centres (usually in the large towns) undoubtedly attract mothers away from the County Clinic. Figures for these are now being collected separately to measure the extent of this change.

Welfare Centres outside these areas have had to increase their sessions particularly where the doctor attending had difficulty in getting through the work because of large numbers. "Birthday" examinations are being carried out at more centres and it is hoped that developmental examinations can be extended to more children to increase the discovery of defects which might otherwise remain unnoticed and untreated until school entry.

According to the figures supplied from local clinic sources, 4,741 primary and reinforcing courses of Diphtheria/Whooping Cough/Tetanus protection (47% of the total County figure of 10,106 for under fives) and 3,617 primary courses of Poliomyelitis vaccination (45% of the total County figure of 8,098 for under fives) were given at the Welfare Centres.

With regard to smallpox vaccinations, fewer of these are done in Child Welfare Centres but 675 of the County total of 4,480 for under fives (i.e. 15%) were done last year.

YOUNG HANDICAPPED CHILDREN

The central register of children under observation for actual or potential handicap is being maintained, and an assessment of the educational need of each child is normally made sometime during the fifth year. The largest group of potentially handicapped children is of those under observation for subnormality or retarded development; some of these also have associated problems such as epilepsy, speech defects, deafness or other physical handicap. Health visitors, working closely with family doctors, are available to give special help and advice to the families of these children. When the mental handicap of the child becomes obvious and accepted by the parents they are sometimes greatly assisted by discussion with the School Medical Officer or the Mental Welfare Officer who can inform them about the services available.

Recently, for severely subnormal young children, day places have been more easily obtainable in Nursery Units of Training Centres, and for long or short stay care in residential institutions, and the waiting lists have been reduced. There are, however, still some severely subnormal children being cared for at home who are too far away from a Training Centre or too delicate to attend. In such a case the mother may easily become overburdened and in need of a rest and all that can be done to relieve the situation is to admit the child periodically to hospital for a few weeks.

Among severely physically handicapped children there are quite a number of children born with spina bifida abnormality who, due to modern surgery, now survive their infancy without mental impairment and who have a reasonable expectation of life.

DISTRIBUTION OF WELFARE FOODS

The distribution of welfare foods continued throughout the year with little change in the arrangements by which these foods are made available to beneficiaries. There were 188 centres on the 31st December, 1966, i.e. 108 at Health Clinics and Child Welfare Centres and 80 in various other premises. The following shows the extent of the distribution of welfare foods during the past three years:—

Year	National Dried Milk (tins)	Cod Liver Oil (Bottles)	Vitamin A & D Tablets (packets)	Orange Juice (Bottles)
1964	67,748	11,546	14,778	124,253
1965	67,158	11,952	13,297	132,155
1966	61,032	11,126	12,489	141,447

A significant fall in issues of national dried milk suggests that mothers now have a preference for proprietary brands of milk powder. This may, of course, be the result of intensive advertising by the firms concerned and the fact that there is little difference in price between the branded and national product.

There is a marked rise in the sales of orange juice and this has been the trend for the past few years. The concentrated orange juice is available to expectant mothers and children up to 5 years as a vitamin C supplement.

DAY NURSERIES

The new Day Nursery in Taunton, built to replace an old hut erected during the last War, opened in June, 1966, increasing the available places by 5. The three County Day Nurseries at Bridgwater, Keynsham and Taunton now provide places for 90 children, the average daily attendance over the year being 79. The selection of children for admission to the Day Nurseries is made by Sub-Committees in accordance with the scale of priorities approved by the County Council to include as first priority:—

- (a) Unmarried, divorced, separated or widowed;
 - (b) Gross financial hardship;
 - (c) Housing;
 - (d) Confinement;
 - (e) Parental illness;
 - (f) Child's benefit;
- and as second priority:—
- (g) Mother engaged in export, health services or as teacher;
 - (h) Financial hardship.

With the growth of the welfare state it is perhaps not unexpected that there were no admissions solely on the grounds of gross financial hardship. Financial hardship is however associated with the group (a) as evidenced by the low rate of payment usually asked from such cases.

Parents pay for the children according to the scale of contributions approved by the County Council ranging from 2s. 0d. per day to 11s. 0d. per day.

At the end of the year the parents of 15% of the total number of children were paying the minimum charge of 2s. 0d. per day, whilst the parents of 31% of the children were paying the maximum charge of 11s. 0d. per day. The remaining 54% were paying from 3s. 0d. to 9s. 6d. daily.

NURSERIES AND CHILD-MINDERS REGULATION ACT

At the end of the year there were 50 registered premises providing a total of 1,064 places and 54 registered daily minders providing 411 places. At the end of 1965 there were 34 registered premises and 48 daily minders. There has been a dramatic increase in the growth of these nurseries and child minders over the past few years, and the frequent changes of registration and variation in numbers makes the work of registration very time-consuming. Qualifications of the staff and medical certificates have to be checked at appropriate intervals. These organisations, which fill a need for care of the pre-school child, can be classified as follows:—

Daily Minders	23
Pre-School Play Groups	65
Nursery School	11
Day Nurseries	5

The distribution is somewhat irregular throughout the County (Long Ashton Rural District is well catered for with 15). Many of the groups have joined the Pre-School Play Groups Association, a national body which provides considerable help and guidance.

Two study days were arranged by the Education Department to provide an organised course for child minders and proprietors of nurseries. Fifty persons attended the first course in April and as the accommodation was limited and a number could not be allocated places, a second course for 48 was held in November. Groups in the north have also benefited greatly from the courses (of 6 sessions) at elementary and advanced level run by the Bristol Education Authority.

NURSING HOMES

At the end of 1966 there were 22 Homes on the register providing a total of 356 beds, four new Homes having been registered during the year. It is perhaps a reflection on the present arrangements for Hospital Maternity Services that only one private registered Maternity Home (four beds) remains in the County.

MARRIAGE GUIDANCE

The branches in South Somerset and Weston-super-Mare, with those in Bristol and Bath for the north of the County, have continued to provide a growing service. Preventive work in educational counselling is increasing slowly and if this can be more widely available it should partly reduce the need to help with marriage breakdowns.

FAMILY PLANNING

At the beginning of the year Circular 5/66 was received from the Ministry of Health about the present and future development of family planning services which were regarded by the Minister as "an essential aspect of family welfare". It stated "Planned parenthood strengthens family life, lack of planning, often due to ignorance of effective methods of contraception, may lead to marital disharmony, ill health and social breakdown, and in some cases even to criminal abortion and death", and concludes that "an adequate family planning service, fully integrated with other community services, will not only contribute to the dispersal of ignorance and fear and to the increase of happy family life, but will also relieve the burdens placed on other local authority services by the physical ill-health and mental distress which so frequently arise from lack of knowledge and advice".

Local Health Authorities were urged to review their present arrangements for Family Planning and the purpose of the circular was that all the local health authorities should make arrangements for advice and treatment (including supplies) for women to whom pregnancy would be detrimental to health and that these services should be available without charge.

In Somerset, the Family Planning Association holds clinics in the County Clinic premises at Frome, Glastonbury, Keynsham, and Weston-super-Mare, and at the hospital premises at Bridgwater, Minehead, Taunton and Yeovil, whilst there are Family Planning Clinics in Bristol and Bath, which serve the north of the County. Supplies have always been the responsibility of the patient except in a few cases of hardship where free supplies have been agreed for a limited period. The growth of family planning in Somerset over the years has been very gradual with the extension of services to meet public and medical demand in bigger centres of population, though the recent introduction of the contraceptive pill produced a tremendous increase in attendances — and the increasing use of the intra-uterine contraceptive device (I.U.D.) has proved of value for cases previously difficult to help.

As a result of the national and local re-organisation of the Family Planning Association, a new branch which included Somerset and Bath and the adjoining part of Wiltshire was constituted and the County Council made a grant to this Branch subject to the following conditions:—

- (1) The grant-aided service of advice and treatment (including supplies) to be available only to women in whom pregnancy would be detrimental to health;
- (2) These services to be available, without charge, to women in the above group;
- (3) The County Council to be satisfied on the service being widely available;
- (4) The Somerset Clinic accounts to be made available for inspection and the grant to be utilised to the benefit of Somerset patients only;
- (5) The Somerset Clinics to keep sufficient records to provide statistics for Somerset women treated.

Registrar General's Figures. Rates for Somerset 1956 – 1966 (England and Wales 1966)

Year	Live Birth	Still Birth	Illegitimate Live Birth %	Infant Deaths	Neonatal Deaths	First Week Deaths	Perinatal Deaths	Maternal Deaths
1956	14.41	24.6	3.8	20.2	15.4	—	35.8	1.10
1957	14.87	19.7	3.8	18.9	14.7	—	32.1	0.53
1958	15.17	20.4	3.3	20.8	14.5	11.5	31.7	0.26
1959	15.26	19.9	3.9	18.7	13.5	11.7	31.3	0.36
1960	15.9	17.6	4.3	19.8	14.8	13.2	30.4	0.00
1961	15.79	18.04	4.5	15.8	10.8	8.9	26.8	0.12
1962	16.5	17.2	5.0	17.4	13.2	11.3	28.2	0.34
1963	16.6	15.4	4.9	14.7	10.9	8.8	24.1	0.22
1964	16.7	15.2	5.8	12.9	8.9	7.4	22.4	0.11
1965	16.76	15.1	5.9	17.3	10.7	9.2	24.2	0.21
1966	16.5	13.9	6.2	15.1	10.8	8.9	22.7	0.11
ENGLAND AND WALES								
1966	17.7	15.4	Not available	19.0	12.9	11.1	26.3	0.26

Registrar General's Totals - Somerset 1956 - 1966 - (England and Wales 1966)

Year	County Population	Live Births	Still Births	Deaths			Total Infant Deaths	Deaths 1-5 Years	Maternal Deaths	Illegitimate Births	
				Deaths 1st week	Deaths 2-4 weeks	Deaths 1-12 Months				Live	Still
1956	491,600	7,085	179		109	34	143	21	5	270	8
1957	495,500	7,370	148		108	31	139	27	4	292	7
1958	496,900	7,539	157		109	48	157	23	3	247	4
1959	500,400	7,636	155	89	14	40	143	29	3	299	4
1960	507,270	8,095	145	106	14	40	160	20	0	345	4
1961	520,340	8,215	151	73	16	41	130	36	1	372	13
1962	527,240	8,700	153	98	17	36	151	30	3	438	6
1963	533,570	8,877	139	78	19	33	130	29	2	433	8
1964	542,990	9,154	141	68	14	37	119	24	1	529	13
1965	549,320	9,205	141	85	14	60	159	26	2	542	2
1966	555,690	9,194	130	82	17	40	139	22	1	567	8
ENGLAND AND WALES											
1966	48,075,300	850,000	13,300	9,447	1,487	5,213	16,147		223		

NURSING SERVICES

The County Council's policy continues of maintaining a combined service of midwifery, district nursing and health visiting in the rural areas whilst full time midwives, home nurses and health visitors are employed in the urban areas. The day to day administration of the county nursing, midwifery and health visiting services is the responsibility of the County Nursing Officer and five Area Nursing Officers, (the senior of whom is also Deputy County Nursing Officer) assisted by two Assistant Area Nursing Officers. The whole time nursing establishment at the end of 1966, was 301 and the nurses employed at that time are shown on the table below:—

Duties	Full-time	Part-time
District Nurse/Midwife/Health Visitors	143	5
District Nurse/Midwives	39	9
Health Visitor; School Nurse; T. B. Visitor	2	—
H.V. School Nurse	32	4
Midwives	11	—
District Nurses	15	31
Male Nurses	7	—
State Enrolled Nurses	6	4
Nursing Auxiliaries	—	1
Clinic Nurses	—	3
Administrative Staff	11	1
Vacancies not covered by temporary staff	6	—
	272	58

There is little change in the level of vacancies during the year and most long-term vacancies have been covered by part-time or temporary staff. It is difficult to recruit generalised workers of the calibre required, and mobile relief staff are almost impossible to obtain.

More use has been made of less qualified staff such as state enrolled nurses and nursing auxiliaries.

TRAINING

Although many enquiries were received about Health Visitor Scholarships and many application forms were completed, the standard of applicants on the whole was not good due to higher "O" level requirements and scholarships were only awarded to ten candidates, two of whom later withdrew.

The joint in-service District Nurse Training Scheme arranged with Bristol commenced at the beginning of the year. It accommodates those members of the staff awaiting district training, including married women with family commitments. It was a very satisfactory start to this Course that of the five nurses who took it, all passed. In addition to these five nurses, another ten were sponsored for Queen's training elsewhere.

Two Courses, on assessment of hearing in young children, each lasting two days, were held for health visitors.

The annual Study Course was again held in April for county nursing staff, and the usual post-graduate courses have been attended by nurses, midwives and health visitors.

Pupil midwives from Musgrove Park Hospital and Mary Stanley Home, Bridgwater, have completed their three months district training, but it is becoming increasingly difficult to provide the requisite number of domiciliary cases for the students. We have also taken pupil midwives from Southmead (Bristol) and St. Martin's (Bath) Hospitals during the year.

HOUSING

The building programme for nurses' houses is reviewed annually. It seems that future needs for such houses will be met mainly by the acquisition of privately built new or older houses. During the year four were purchased, at Backwell, Clevedon, Combwich and Yeovil, and the County Council built three houses at Keynsham. The Local Health Authority needs to provide good housing to attract staff, and it is necessary to have a number of houses throughout the County, but difficulty arises when nurses wish to leave County provided houses and to purchase their own. This is something which is likely to increase with the passage of time as more nurses are now marrying and continuing to work, but it is, however, a development which can only be encouraged as house ownership is a stabilising factor and facilitates the recruitment of married nurses. The County Council now owns 69 and rents 40 houses.

TRANSPORT

At the end of the year, the County Council were providing a fleet of 111 cars for the nursing and health visiting staff, and 216 nurses and health visitors had car allowances.

GENERAL PRACTITIONER LIAISON WITH PUBLIC NURSING STAFF

The first pilot scheme commenced in Yeovil in November, 1964, and since then further schemes have been implemented during 1965 in Wells and Burnham-on-Sea/Highbridge, and during 1966 in Taunton, Nailsea, Weston-super-Mare, Ilminster/South Petherton, Shepton Mallet/Evercreech, and Ilchester. The staff involved in these schemes of attachment is as follows:—

	<u>Full-time</u>	<u>Part-time</u>
24	generalised workers	
20	health visitors	
14	general nurses	
9	nurse/midwife	17
7	domiciliary midwives	
5	state enrolled nurses.	

In addition to full attachment, in other areas public health nurses are attending general practitioner well-baby clinics, ante-natal clinics and special surgery sessions.

Early in 1967 it is hoped to implement three further schemes at Clevedon, Minehead/Porlock, and Street/Glastonbury. This will involve a further 20 full time and 5 part time staff and will bring the total number of public health nurses in family doctor attachments to well over one third of the total establishment.

Ideally the close co-operation between general practitioner and public health nurse should benefit not only patients, who must be the first consideration, but also the doctor and nurse by avoiding duplication of visits. In time it will almost certainly mean considerable changes in the nature of the work carried out by the County nursing staff and more ancillary staff will be needed to leave skilled nurses free to use to full advantage the knowledge and skills gained during their training. The change to a practice case load instead of that of a geographical area leads to increased mileage and staff travelling time. This is an additional reason for making sure that nursing experience and skill is properly used. At present the nurses do not visit the doctors' cases outside the existing nursing areas, but they are expected to liaise with their colleagues on behalf of the practice doctors. In some cases two or more nursing areas have been joined together in order to cover the greater part of a doctor's practice.

Much time is given to the preparation of an area for attachment. The Area Nursing Officer meets all the doctors concerned and discusses the 'pros' and 'cons' with the nursing staff. No hard and fast rules are laid down as to how attachments should work and in the main doctors and nurses have adjusted themselves without difficulty. The nursing staff are encouraged to assist the family doctors with any special projects which they might be undertaking. Arrangements for regular meetings are left to the individuals concerned and may vary from daily to once or twice a week.

HOSPITAL LIAISON AND CO-OPERATION

In view of the long waiting list for hospital admissions, perhaps it is surprising that there has not been any extensive use of the domiciliary nursing service for earlier discharge of post-operative cases in this area. The maternity hospitals, however, have made full use of the domiciliary services and it seems more than probable that even more cases will be discharged early to the care of the domiciliary midwives. Health visitors' and district nurses have kept in touch with geriatric units and in some cases have co-operated in schemes whereby patients may be admitted to hospital for a short period in order to allow relatives to take a holiday, and in arranging for patients already in hospital to spend a short time at home with their relatives.

Liaison is maintained by health visitors with Chest Clinics all of which have now been taken over by the Hospital authorities. In addition, health visitors and area nursing officers pay regular liaison visits to children's wards and special care units in Bath, Yeovil and Taunton. It is hoped that it will be possible to extend this to other hospitals in the near future.

MIDWIFERY

There were 176 full time and 11 part time midwives employed in domiciliary practice and during 1966 they attended 1,867 deliveries, a decrease of 156 from the previous year. The continuing decline over the past years is illustrated by the following figures:—

Year	Deliveries
1960	2,496
1962	2,453
1964	2,195
1966	1,867

In some areas district midwives are not delivering many mothers, but it has been possible to arrange for them to work for a short time in hospitals, in order that they may have a certain amount of practice to maintain skills.

There has been an increase in the number of women now being confined in hospital but more of them return home before the tenth day and many in fact, return after 48 hours. This, of course, keeps the district midwives occupied, but does not give them the essential practice in delivering. As the trend towards hospital confinement is likely to increase the domiciliary midwifery service will have to be looked into carefully, particularly as there are now fewer public health nurses with midwifery qualifications coming into the field of generalised work.

HOME NURSING

Of the district nursing staff employed at the end of the year, 173 had completed a course of district training. The number of persons nursed by the home nurses during 1966 was 13,268 and of these 62% were in the over 65 age group. The total number of visits paid by the home nurses was 341,002.

Mechanical aids for lifting heavy patients are still in demand and the use of incontinence pads has been extended considerably during the year. Disposable equipment saves a lot of the home nurse's time.

The Marie Curie Foundation Day and Night Service as previously have given nursing help to cancer cases thus greatly assisting the patient's relatives. Financial grants have also been made by the Foundation, in special cases of need.

The British Red Cross Society and St. John Ambulance Brigade has continued to administer the "medical comforts" scheme as agents of the County Council. Equipment is held in a large number of depots throughout the County and nursing aids of all kinds can be supplied. We are grateful to the voluntary personnel at the depots for their co-operation with the nursing staff. Without their help patients could not be discharged to their own homes so soon after hospital treatment, thereby relieving the pressure on badly needed and expensive hospital beds. A total of 6,705 articles have been made available to patients during the year.

TUBERCULOSIS VISITING

Tuberculosis home visiting has now largely been passed to the health visitors, and the tuberculosis visitors no longer organise the Chest Clinics with the exception of Clevedon. The health visitors act in liaison with the Chest Physician at each Chest Clinic.

SCHOOL NURSING

As I mentioned in my last report some increase has been made in the use of ancillary staff in schools to relieve the more qualified staff of routine work, but this has not been fully implemented because of financial restrictions. No doubt, when funds are available, this is a development which will continue.

HEALTH EDUCATION

During the year, the Central Health Education Committee has met to discuss methods and practices of health education. More visual aids and new posters and leaflets were made available. The Organiser of Further Education gave very helpful advice in the making of some simple visual aids. The Taunton Health Education Group provided an exhibition in Home Safety at the Taunton Flower Show. Some talks were given in Schools by the staff, but the demand was not very great.

SUPERVISION OF MIDWIVES

For the purposes of the Midwives Acts, the medical supervisor of midwives is the Senior Medical Officer for Maternal and Child Welfare, and non-medical supervision is carried out by the County Nursing Officer and five Area Nursing Officers. Visits to maternity units are paid by the County Nursing Officer as non-medical supervisor of midwives.

During the year 194 full time domiciliary midwives and 141 hospital midwives notified their intention to practice. Private midwives in nursing homes and domiciliary practice numbered 4. Notifications of exposure to infection number 194 and these were investigated. Medical aid was sought in 1,181 cases of which 70 being for toxæmia of pregnancy.

HEALTH VISITING

The following table shows the progress which has been made since the commencement of the National Health Service towards a fully qualified service:—

Year	Full-time Health Visitors with H.V. Certificate	Full-time District Nursing Staff undertaking H.V. duties	
		With H.V. Certificate	Without H.V. Certificate
1948	25	29	130
1954	30	87	74
1958	31	108	47
1964	29	114	21
1965	35	121	18
1966	32	129	16

Closer co-operation between the Health Visitor and family doctor as a result of the attachment scheme described more fully in an earlier paragraph should result in an improved service especially in respect of the elderly and in the fields of cervical cytology. Owing to the mild winter, no cases of hypothermia were reported, but "Glogas" fires are available for use by elderly people if required.

HOME HELP SERVICE

One of the main functions of the Home Help Service is to be available when other health or welfare services are in difficulties. Thus a temporary shortage of hospital beds, an epidemic, a shortage of foster homes or any crisis among staff concerned with domiciliary care may have immediate repercussions on the number of applications for help, and conversely when the other services run smoothly the calls on the Service are reduced.

During the first three months of 1966 the record number of 664 applications were received, 60 more than in the first three months of 1965. This appears to have been caused in part by a mild winter with a great deal of seasonal illness, and also by the 'attachment' of nursing staffs to General Practitioners which resulted in the needs of many old people being brought to light. Heavy calls on the Service, both for new applicants and for those already receiving help but whose help had to be increased owing to severe illness, continued well into the new financial year with the result that the Service had to be temporarily restricted to ensure that expenditure would be within the financial provision. In spite of this reduction, which was effected with remarkable smoothness, the number of householders receiving help at the end of 1966 was 91 more than in December 1965.

As the years go by the number of elderly persons helped increases, but the amount of help they need tends to decrease owing to the provision of more modern and easily run accommodation often without an open fire which necessitates a daily visit from a Home Help during the winter months. Though electric fires or central heating may be labour-saving and may also contribute to the safety of the elderly, they may also rob them of companionship, much needed occupation, and some degree of comfort.

The number of people needing help following accidents — mainly caused by the motor car — is gradually taking the place of the help needed in the early days of this service for patients suffering from tuberculosis. The number is larger than appears from the statistics as many older people are the victims of road accidents while out with relatives and friends at week-ends or while crossing busy roads.

The Children's Department are now making more use of Home Helps as a means of keeping a family together after the death or during the absence of the mother. These are often long-term but rewarding commitments. The Service continues to be used most extensively in the towns of Weston-super-Mare and Burnham-on-Sea and least used in the rural districts of Wells and Dulverton.

Some re-organisation in the work of the areas was effected during the year, with the result that the number of visits paid by area organisers and assistants increased by 796 to 19,736 compared with 18,940 in 1965, while the distance covered was reduced by over 2,000 miles.

A tribute to the staff of the areas, both administrative and clerical, may be timely, as the effective running of this service interferes not a little with their private lives and extra hours of duty and many inconveniences are endured willingly and without complaint.

I also commend the work of the members of the W.R.V.S. and others who so freely and cheerfully give their time to this Service in a voluntary capacity, some of whom have helped almost since the inception of the Home Help Service in Somerset in 1948.

There have been criticisms of the Home Help Service as a whole both in the evidence submitted by statutory and voluntary organisations to the Seeborn Committee and also by the Consumer's Association in its Magazine "Which". Some of the written evidence to the Seeborn Committee deplored the fact that Home Helps were available only within strict working hours and for five days a week. The Consumer's Association, while commending the work of the Home Helps, were slightly critical of an administration

which allowed emergencies to take place only within strict office hours. In the face of this criticism I would stress the fact that in this County, due perhaps in part to the Service's voluntary beginnings, every effort has always been made to provide a twenty-four hour service where such a service is essential. The seven area offices are staffed on Saturday mornings and all the organising staff from the County Organiser downwards are on call in their own homes outside office hours and all are required to live within their areas. One member of the administrative staff of each area is on call over public holiday periods.

With regard to the Home Helps, a service which is staffed mainly by women who are employed on a casual hourly basis cannot be expected to respond to emergencies as effectively as a service where the staff are employed on a regular footing, though in many instances because there are few hard and fast rules the Home Helps gladly respond to a call for their help in an emergency. Few however are on the telephone and many live miles from any centre. An urgent call for help may therefore necessitate hours of work and travelling by the organising staff.

On the other side of the picture the calls outside office hours at weekends and over public holiday periods have tended to decrease over the years except in the three busy months after Christmas when other domiciliary services are hard pressed. The 'Night Attendants' are called on so irregularly, except in the town of Weston-super-Mare, that it is difficult to retain their services and the three regular resident Home Helps are normally able to meet the calls for residential help. Fortunately we have less demand for help on Saturdays and Sundays as it is becoming more difficult to recruit women who are prepared to leave their families at week-ends. The increasing practice of a five-day week may well be the answer to both — more members of the family are at home to care for the old and sick and more husbands are at home and wish for their wives company at week-ends.

The difficulty of reaching the sick and aged in remote rural areas increases year by year though the provision of car allowances to twenty Home Helps has mitigated this problem to some extent.

HOME HELPS ON REGISTER DECEMBER 1966

	Full-time	Resident	Part-time	Casual	Night Attendants	Total 1966 (1965)
Weston-super-Mare ...	21 (20)	—	81 (82)	2 (9)	2 (1)	106 (112)
Clevedon ...	5 (6)	—	38 (39)	12 (14)	—	55 (59)
Midsomer Norton ...	16 (21)	1 (—)	78 (84)	17 (18)	2 (—)	114 (123)
Glastonbury ...	3 (5)	—	37 (39)	9 (10)	—	49 (54)
Bridgwater ...	16 (20)	—	84 (89)	14 (15)	—	114 (124)
Yeovil ...	15 (17)	—	73 (78)	18 (20)	—	106 (115)
Taunton ...	34 (39)	2 (2)	52 (62)	20 (19)	1 (—)	109 (122)
	110 (128)	3 (2)	443 (473)	92 (105)	5 (1)	653 (709)

New Applicants Visited 1966

	New Cases	Abortive Visits
Weston-super-Mare ...	407 (383)	35 (27)
Clevedon ...	226 (206)	28 (25)
Midsomer Norton ...	245 (316) 3 months include Glastonbury	33 (26)
Glastonbury ...	155 (112) 9 months	12 (12)
Bridgwater ...	385 (375)	40 (40)
Yeovil ...	278 (314)	39 (31)
Taunton ...	411 (387)	23 (43)
	2,107 (2093)	210 (204)

Actual number of old people helped

	Weston-super-Mare	...	ceased	281
Clevedon	...	cont.	cont.	557
Midsomer Norton	...	ceased	ceased	107
Glastonbury	...	cont.	cont.	232
Bridgwater	...	ceased	ceased	146
Yeovil	...	cont.	cont.	431
Taunton	...	ceased	ceased	68
	...	cont.	cont.	181
	...	ceased	ceased	244
	...	cont.	cont.	566
	...	ceased	ceased	179
	...	cont.	cont.	449
	...	ceased	ceased	243
	...	cont.	cont.	505
		ceased	ceased	1,268
		cont.	cont.	2,921
		total	total	4,189

Figures for 1965 in brackets.

	Old age (over 65)	Chronic illness	Mental illness	T.B.	Post operative	General illness	Maternity	Post & pre-natal	Accidents	Child Care	Total	Total for year
WESTON-SUPER-MARE ceased cont.	186 (143) 422 (415)	11 (17) 55 (46)	— (9) 2 (3)	1 (—) 1 (1)	34 (61) 12 (5)	86 (40) 3 (13)	60 (58) — (—)	19 (16) 2 (2)	14 (12) — (—)	8 (1) 2 (2)	419 (357) 499 (487)	918 (844)
CLEVEDON ceased cont.	72 (51) 178 (170)	4 (11) 16 (16)	3 (4) 2 (1)	2 (—) — (—)	23 (18) 6 (5)	9 (12) 2 (—)	68 (55) — (3)	4 (5) 1 (—)	4 (7) 2 (2)	10 (7) 3 (2)	199 (170) 210 (199)	409 (369)
MIDSOMER NORTON ceased cont.	104 (133) 431 (402)	26 (14) 31 (50)	7 (5) — (3)	— (1) 1 (1)	19 (23) 2 (5)	8 (7) — (3)	56 (47) — (1)	14 (4) 4 (4)	6 (4) 1 (4)	5 (4) 2 (—)	245 (242) 472 (473)	717 (715)
GLASTONBURY ceased cont.	58 (59) 136 (147)	7 (9) 21 (17)	2 (2) 1 (1)	1 (1) 1 (1)	16 (11) 4 (1)	13 (5) 6 (—)	28 (35) — (—)	4 (9) 3 (1)	— (2) 2 (1)	5 (1) 2 (1)	134 (134) 176 (170)	310 (304)
BRIDGWATER ceased cont.	161 (152) 384 (381)	34 (33) 74 (79)	8 (9) 9 (9)	1 (2) 5 (2)	21 (16) 4 (5)	22 (9) 1 (—)	49 (79) 2 (1)	16 (23) — (—)	17 (13) — (1)	12 (4) 4 (8)	341 (340) 483 (486)	824 (826)
YEOVIL ceased cont.	125 (99) 348 (339)	21 (4) 16 (13)	3 (7) 7 (3)	1 (1) 3 (4)	7 (19) 3 (7)	22 (37) 3 (7)	44 (49) 1 (—)	20 (27) — (1)	— (10) 6 (—)	2 (—) 2 (2)	245 (253) 389 (376)	634 (629)
TAUNTON ceased cont.	173 (159) 386 (325)	19 (24) 54 (52)	5 (7) 3 (7)	— (—) — (—)	22 (38) 3 (5)	40 (9) 3 (4)	55 (58) 2 (—)	20 (19) — (6)	6 (2) 1 (1)	9 (10) 2 (1)	349 (326) 454 (401)	803 (727)
Total ceased Total cont.	879 (796) 2285 (2179)	122 (112) 267 (273)	28 (43) 24 (27)	6 (5) 11 (9)	142 (186) 34 (33)	200 (119) 18 (27)	360 (381) 5 (5)	97 (103) 10 (14)	47 (50) 12 (9)	51 (27) 17 (16)	1932 (1822) 2683 (2592)	4615 (4414)
Total for year	3164 (2975)	389 (385)	52 (70)	17 (14)	176 (219)	218 (146)	365 (386)	107 (117)	59 (59)	68 (43)	4615 (4414)	

Long Term Cases

	Over 12 months	Over 6 months
Weston-super-Mare	344 (353)	67 (60)
Clevedon ...	140 (129)	21 (30)
Midsomer Norton ...	375 (348)	36 (47)
Glastonbury ...	122 (117)	22 (29)
Bridgwater ...	351 (389)	59 (72)
Yeovil ...	319 (287)	16 (18)
Taunton ...	303 (252)	66 (54)
	1954 (1875)	287 (310)

Maternity Bookings	Resident	Full-time	Part-time	Few Hours	Cancellations
Weston-super-Mare	— (1)	4 (12)	24 (25)	32 (20)	20 (24)
Clevedon ...	4 (—)	— (4)	25 (30)	39 (21)	17 (18)
Midsomer Norton ...	3 (4)	7 (6)	30 (20)	16 (18)	10 (10)
Glastonbury ...	2 (4)	— (2)	21 (20)	5 (9)	4 (11)
Bridgwater ...	3 (5)	8 (19)	28 (31)	12 (25)	12 (17)
Yeovil ...	6 (6)	3 (18)	36 (15)	— (10)	9 (7)
Taunton ...	6 (3)	14 (13)	20 (23)	15 (19)	6 (12)
	24 (23)	36 (74)	184 (164)	119 (122)	78 (99)

VACCINATION AND IMMUNISATION

Vaccination and Immunisation arrangements continued unchanged from previous years. A modified Schedule P programme is in use throughout the County involving combined vaccines whenever possible.

DIPHTHERIA AND WHOOPING COUGH IMMUNISATION

During the year 7,655 children under sixteen years of age completed a primary course of diphtheria immunisation and a further 13,228 received reinforcing injections. Seven thousand two hundred and sixty five children were given protection against whooping cough.

TETANUS IMMUNISATION

Primary courses of tetanus immunisation were completed by 8,550 children under sixteen years of age and a further 12,577 children received a reinforcing injection.

SMALLPOX VACCINATION

Four thousand eight hundred and seventy two primary vaccinations and 821 re-vaccinations of children under sixteen years of age were carried out during the year. The primary vaccinations included 4,480 children under five years of age.

YELLOW FEVER VACCINATION

One hundred and ninety three persons were vaccinated against yellow fever at the Yellow Fever Vaccination Centre, Taunton.

POLIOMYELITIS VACCINATION

No major change in the poliomyelitis vaccination scheme was introduced during the year.

The Joint Committee on Vaccination and Immunisation reviewed the age at which oral vaccine against poliomyelitis should begin and confirmed its previous opinion that vaccination begun at six months of age was likely to be more effective than if begun at an earlier age. However, there was evidence that oral poliomyelitis vaccine was reasonably effective from the age of three months onwards and the Ministry of Health raised no objection to those who, for various reasons, preferred to offer three doses concurrently with triple (diphtheria, tetanus and pertussis) vaccine before the age of six months.

The Committee considered that there was insufficient evidence to enable a decision to be reached on the need to offer a reinforcing dose of oral poliomyelitis vaccine in the second year of life. Where primary immunisation was completed with three doses of oral poliomyelitis vaccine begun before the age of six months the Ministry of Health raised no objection to the offer of a further dose of oral vaccine at 18 to 21 months.

The Committee saw no need to offer reinforcing doses of poliomyelitis vaccine to adults unless they were likely to be exposed to special risk of contracting the disease.

Primary courses of poliomyelitis vaccination were completed by 9,166 children under sixteen years of age and 7,146 school children received a reinforcing dose.

ANTHRAX VACCINATION

In addition to vaccinations carried out by Appointed Factory Doctors, Assistant County Medical Officers gave sixty six persons a course of three injections and eighteen persons the first two injections of a primary course.

MEASLES VACCINATION

The Joint Committee on Vaccination and Immunisation did not recommend a national campaign for immunisation against measles but agreed that measles vaccines should be available through commercial channels to those doctors who wished to use them.

DIPHTHERIA IMMUNISATION
Primary Courses

Number of children who completed a full course of primary immunisation in the
year ended 31st December, 1966

DISTRICT	Children born in the years:—					Others under age 16	Total
	1966	1965	1964	1963	1959—62		
RURAL							
Axbridge	106	227	17	4	25	14	393
Bathavon	86	122	12	7	12	—	239
Bridgwater	152	190	14	6	21	11	394
Chard	65	83	6	—	3	—	157
Clutton	71	128	17	1	8	5	230
Dulverton	19	29	2	—	3	—	53
Frome	49	58	3	—	6	1	117
Langport	79	94	12	1	8	1	195
Long Ashton	244	307	11	7	20	—	589
Shepton Mallet	45	75	12	2	6	1	141
Taunton	104	111	8	1	17	22	263
Wellington	38	72	7	5	7	3	132
Wells	45	77	8	3	5	2	140
Williton	63	86	6	3	8	3	169
Wincanton	95	106	1	5	11	1	219
Yeovil	198	191	20	3	8	1	421
Totals :	1,459	1,956	156	48	168	65	3,852
URBAN							
Bridgwater	150	245	19	10	20	—	444
Burnham	35	81	3	2	5	1	127
Chard	31	60	3	1	3	55	153
Clevedon	62	100	6	1	4	—	173
Crewkerne	23	50	10	2	1	—	86
Frome	86	106	5	1	4	—	202
Glastonbury	40	51	3	2	2	1	99
Ilminster	11	24	—	—	—	—	35
Keynsham	32	82	10	2	9	3	138
Minehead	34	41	4	2	2	1	84
Norton Radstock	86	150	8	—	10	3	257
Portishead	11	27	19	3	11	—	71
Shepton Mallet	10	30	6	—	9	1	56
Street	65	52	1	—	1	1	120
Taunton	216	266	18	6	40	9	555
Watchet	11	17	2	—	2	—	32
Wellington	32	72	4	1	5	2	116
Wells	49	67	1	1	2	5	125
Weston-super-Mare	152	283	12	10	35	1	493
Yeovil	191	189	9	4	31	13	437
Totals :	1,327	1,993	143	48	196	96	3,803
County Totals :	2,786	3,949	299	96	364	161	7,655

DIPHTHERIA IMMUNISATION

Reinforcing Injections

Number of children who received a reinforcing injection in the year ended
31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	1	31	84	25	405	339	885
Bathavon	—	18	54	14	160	92	338
Bridgwater	—	53	140	24	345	160	722
Chard	—	13	38	3	135	119	308
Clutton	—	34	87	17	226	158	522
Dulverton	—	1	4	—	43	32	80
Frome	—	15	34	9	76	34	168
Langport	—	20	43	13	230	124	430
Long Ashton	—	110	215	34	519	45	923
Shepton Mallet	—	5	28	8	140	104	285
Taunton	—	25	67	16	228	186	522
Wellington	—	1	9	2	103	74	189
Wells	1	16	26	4	117	75	239
Williton	—	8	35	4	139	108	294
Wincanton	—	4	15	3	113	54	189
Yeovil	—	60	153	22	315	235	785
Totals :	2	414	1,032	198	3,294	1,939	6,879
URBAN							
Bridgwater	—	82	154	24	277	46	583
Burnham	—	23	90	9	92	60	274
Chard	—	6	26	2	84	2	120
Clevedon	—	30	62	8	129	5	234
Crewkerne	—	11	35	6	73	42	167
Frome	—	18	34	8	173	4	237
Glastonbury	—	1	4	—	69	1	75
Ilminster	—	3	18	—	57	31	109
Keynsham	—	5	41	12	185	250	493
Minehead	—	20	38	3	75	18	154
Norton Radstock	—	30	112	17	179	67	405
Portishead	—	12	40	3	85	5	145
Shepton Mallet	—	1	7	2	51	57	118
Street	—	36	63	5	113	1	218
Taunton	—	70	80	12	448	347	957
Watchet	—	4	6	—	53	19	82
Wellington	—	4	3	4	98	73	182
Wells	—	4	16	6	107	87	220
Weston-super-Mare	—	31	88	12	407	329	867
Yeovil	—	74	147	19	250	219	709
Totals :	—	465	1,064	152	3,005	1,663	6,349
County Totals :	2	879	2,096	350	6,299	3,602	13,228

WHOOPING COUGH IMMUNISATION

Primary Courses

Number of children who completed a course of primary immunisation in the year ended 31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	106	227	16	4	13	4	470
Bathavon	85	122	12	7	8	—	234
Bridgwater	152	190	14	6	2	—	264
Chard	65	83	6	—	2	—	156
Clutton	71	128	17	1	2	—	219
Dulverton	19	29	2	—	—	—	50
Frome	49	58	3	—	3	—	113
Langport	79	94	12	1	4	1	191
Long Ashton	244	307	10	7	8	—	576
Shepton Mallet	45	69	12	2	2	—	130
Taunton	104	112	8	1	6	—	231
Wellington	38	72	7	5	2	—	124
Wells	45	77	8	2	3	—	135
Williton	63	86	6	3	3	—	161
Wincanton	95	126	4	4	10	1	240
Yeovil	198	191	20	3	2	1	415
Totals :	1,458	1,971	157	46	70	7	3,709
URBAN							
Bridgwater	149	244	16	9	6	—	424
Burnham	35	81	3	2	3	—	124
Chard	31	60	3	1	2	—	97
Clevedon	62	100	6	1	—	—	169
Crewkerne	23	50	10	2	1	—	86
Frome	86	106	5	1	1	—	199
Glastonbury	40	51	3	2	—	—	96
Ilminster	11	24	—	—	—	—	35
Keynsham	32	82	10	2	5	1	132
Minehead	33	41	4	2	2	—	82
Norton Radstock	86	150	8	—	5	1	250
Portishead	11	27	19	3	2	—	62
Shepton Mallet	9	25	4	—	4	—	42
Street	65	52	1	—	—	—	118
Taunton	216	266	17	6	9	2	516
Watchet	11	17	2	—	1	—	31
Wellington	32	72	4	1	2	1	112
Wells	49	67	1	—	1	—	118
Weston-super-Mare	152	283	12	10	11	—	468
Yeovil	190	189	9	4	3	—	395
Totals :	1,323	1,987	137	46	58	5	3,556
County Totals :	2,781	3,958	294	92	128	12	7,265

WHOOPIING COUGH IMMUNISATION

Reinforcing Injections

Number of children who received a reinforcing injection in the year ended
31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	1	30	82	25	56	12	206
Bathavon	—	18	53	13	28	1	113
Bridgwater	—	53	137	19	86	7	302
Chard	—	13	38	3	11	1	66
Clutton	—	34	87	17	16	1	155
Dulverton	—	1	2	—	9	4	16
Frome	—	15	34	9	16	1	75
Langport	—	20	43	13	20	1	97
Long Ashton	—	110	213	32	94	3	452
Shepton Mallet	—	5	27	8	21	3	64
Taunton	—	25	61	16	38	3	143
Wellington	—	1	7	2	11	1	22
Wells	1	15	26	4	7	—	53
Williton	—	9	35	4	13	4	65
Wincanton	—	4	15	3	35	2	59
Yeovil	—	57	145	22	56	2	282
Totals :	2	410	1,005	190	517	46	2,170
URBAN							
Bridgwater	—	80	148	23	15	1	267
Burnham	—	23	90	9	55	11	188
Chard	—	6	24	2	1	2	35
Clevedon	—	30	60	8	18	—	116
Crewkerne	—	11	35	6	4	—	56
Frome	—	18	34	8	15	1	76
Glastonbury	—	1	4	—	7	—	12
Ilminster	—	3	18	—	3	—	24
Keynsham	—	5	41	11	27	4	88
Minehead	—	20	38	3	21	3	85
Norton Radstock	—	30	112	17	95	4	258
Portishead	—	11	40	3	3	1	58
Shepton Mallet	—	1	7	2	3	1	14
Street	—	36	63	4	1	—	104
Taunton	—	70	80	12	46	2	210
Watchet	—	4	6	—	1	—	11
Wellington	—	4	3	4	20	—	31
Wells	—	4	15	6	15	1	41
Weston-super-Mare	—	30	83	9	24	4	150
Yeovil	—	68	134	14	66	1	283
Totals :	—	455	1,035	141	440	36	2,107
County Totals :	2	865	2,040	331	957	82	4,277

TETANUS IMMUNISATION

Primary Courses

Number of children who completed a full course of primary immunisation in the year ended 31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	106	227	17	4	25	33	412
Bathavon	86	122	12	7	18	14	259
Bridgwater	152	190	14	6	27	88	477
Chard	65	83	6	—	3	—	157
Clutton	71	128	17	1	8	6	231
Dulverton	19	29	2	—	3	1	54
Frome	49	58	3	—	6	—	116
Langport	79	94	12	1	8	1	195
Long Ashton	244	307	11	7	20	8	597
Shepton Mallet	45	75	12	2	6	3	143
Taunton	104	111	8	1	19	112	355
Wellington	38	72	7	5	7	40	169
Wells	45	77	8	3	7	2	142
Williton	63	86	6	3	14	54	226
Wincanton	95	106	1	5	11	1	219
Yeovil	198	191	20	3	10	132	554
Totals :	1,459	1,956	156	48	192	495	4,306
URBAN							
Bridgwater	150	245	19	10	19	21	464
Burnham	35	81	3	2	6	20	147
Chard	31	60	3	1	3	57	155
Clevedon	62	100	6	1	4	—	173
Crewkerne	23	50	10	2	1	—	86
Frome	86	106	5	1	4	—	202
Glastonbury	40	51	3	2	2	1	99
Ilminster	11	24	—	—	—	—	35
Keynsham	32	82	10	2	21	26	173
Minehead	34	41	4	2	6	7	94
Norton Radstock	86	150	8	—	11	3	258
Portishead	11	27	19	3	11	—	71
Shepton Mallet	10	30	6	—	9	1	56
Street	65	52	1	—	1	1	120
Taunton	216	266	18	6	47	156	709
Watchet	11	17	2	—	2	3	35
Wellington	32	72	4	1	6	47	162
Wells	49	66	1	1	7	11	135
Weston-super-Mare	152	283	12	10	36	2	495
Yeovil	191	189	9	4	33	149	575
Totals :	1,327	1,992	143	48	229	505	4,244
County Totals :	2,786	3,948	299	96	421	1,000	8,550

TETANUS IMMUNISATION

Reinforcing Injections

Number of children who received a reinforcing injection in the year ended
31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	1	31	84	25	405	341	887
Bathavon	—	18	54	14	161	92	339
Bridgwater	—	53	140	25	342	156	716
Chard	—	13	38	3	135	119	308
Clutton	—	34	87	17	226	157	521
Dulverton	—	1	4	—	42	35	82
Frome	—	15	34	9	76	34	168
Langport	—	20	43	13	229	124	429
Long Ashton	—	110	215	34	519	49	927
Shepton Mallet	—	5	28	8	140	106	287
Taunton	—	25	67	16	227	97	432
Wellington	—	1	9	2	103	46	161
Wells	1	16	26	4	115	77	239
Williton	—	8	35	4	132	62	241
Wincanton	—	4	15	3	113	52	187
Yeovil	—	60	153	24	313	109	659
Totals :	2	414	1,032	201	3,278	1,656	6,583
URBAN							
Bridgwater	—	82	154	24	276	39	575
Burnham	—	23	90	9	92	81	295
Chard	—	6	26	2	84	3	121
Clevedon	—	30	62	8	129	6	235
Crewkerne	—	11	35	6	73	42	167
Frome	—	18	34	8	174	3	237
Glastonbury	—	1	4	—	69	1	75
Ilminster	—	3	18	—	57	31	109
Keynsham	—	5	41	12	175	241	474
Minehead	—	20	38	3	73	13	147
Norton Radstock	—	30	112	17	178	67	404
Portishead	—	12	40	3	85	5	145
Shepton Mallet	—	1	7	2	51	57	118
Street	—	36	63	5	113	1	218
Taunton	—	70	80	12	442	196	800
Watchet	—	4	6	—	53	16	79
Wellington	—	4	3	4	97	25	133
Wells	—	4	16	6	102	112	240
Weston-super-Mare	—	31	88	12	404	328	863
Yeovil	—	74	147	19	241	78	559
Totals :	—	465	1,064	152	2,968	1,345	5,994
County Totals :	2	879	2,096	353	6,246	3,001	12,577

SMALLPOX VACCINATION

Number of Persons vaccinated (or re-vaccinated) in the year ended 31st December,
1966

RURAL DISTRICTS

Age groups:—	0—3 mths	4—6 mths	7—9 mths	10—12 mths	1 year		2—4 years		5—15 years		Totals	
	P	P	P	P	P	R	P	R	P	R	P	R
Axbridge	1	1	6	7	122	—	48	2	21	30	206	32
Bathavon	2	2	3	3	114	—	27	3	17	31	168	34
Bridgwater	20	33	1	5	128	—	52	5	27	47	266	52
Chard	2	—	1	3	54	—	4	3	2	5	66	8
Clutton	—	—	—	2	37	—	37	—	10	5	86	5
Dulverton	—	—	—	—	10	—	8	—	2	—	20	—
Frome	—	1	2	1	39	—	29	1	7	9	79	10
Langport	4	3	6	16	99	—	12	—	2	1	142	1
Long Ashton	3	3	42	35	232	—	80	5	25	53	420	58
Shepton Mallet	—	—	—	6	52	—	12	—	2	4	72	4
Taunton	1	8	8	11	118	—	29	2	24	19	199	21
Wellington	—	2	3	4	52	—	11	1	2	3	74	4
Wells	3	—	1	4	51	—	12	—	7	7	78	7
Williton	2	—	3	4	52	—	16	1	—	9	77	10
Wincanton	2	41	14	8	91	—	20	1	11	19	187	20
Yeovil	11	18	18	12	209	—	63	4	30	187	361	191
Totals :	51	112	108	121	1,460	—	460	28	189	429	2,501	457

URBAN DISTRICTS

Age groups:—	0—3 mths	4—6 mths	7—9 mths	10—12 mths	1 year		2—4 years		5—15 years		Totals	
	P	P	P	P	P	R	P	R	P	R	P	R
Bridgwater	1	1	4	4	144	—	64	4	32	37	250	41
Burnham	—	1	2	6	42	—	17	1	6	9	74	10
Chard	—	2	2	2	32	—	6	—	3	5	47	5
Clevedon	4	1	3	—	95	1	18	—	4	6	125	7
Crewkerne	—	—	3	5	38	—	10	2	—	4	56	6
Frome	2	—	—	—	63	—	23	—	9	7	97	7
Glastonbury	9	2	1	2	32	—	5	—	—	4	51	4
Ilminster	—	—	—	2	7	—	6	—	2	—	17	—
Keynsham	—	2	1	—	74	—	29	—	15	21	121	21
Minehead	4	1	3	4	50	—	4	—	—	2	66	2
Norton Radstock	1	—	1	2	80	—	18	2	6	10	108	12
Portishead	1	1	—	—	65	—	18	—	5	—	90	—
Shepton Mallet	—	—	—	2	36	—	4	—	—	—	42	—
Street	—	1	1	26	56	—	10	1	7	20	101	21
Taunton	6	22	17	35	171	—	51	5	35	68	337	73
Watchet	—	—	—	1	22	—	2	2	3	2	28	4
Wellington	—	—	2	1	50	—	4	—	1	1	58	1
Wells	1	—	—	2	50	—	19	—	2	21	74	21
Weston-super-Mare	5	3	11	19	172	—	48	3	26	10	284	13
Yeovil	1	3	2	5	235	—	52	—	47	116	345	116
Totals :	35	40	53	118	1,514	1	408	20	203	343	2,371	364
County Totals :	86	152	161	239	2,974	1	868	48	392	772	4,872	821

P = Primary Vaccination

R = Re-Vaccination

POLIOMYELITIS VACCINATION

Primary Courses

Number of children who received a course of primary vaccination during the year ended 31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	80	300	53	19	48	4	504
Bathavon	58	151	19	10	23	8	269
Bridgwater	130	252	43	14	52	9	500
Chard	27	96	19	3	8	1	154
Clutton	64	175	33	11	37	19	339
Dulverton	6	30	6	2	5	—	49
Frome	23	70	19	4	14	5	135
Langport	64	117	8	7	7	3	206
Long Ashton	102	437	46	25	47	15	672
Shepton Mallet	32	94	22	6	36	9	199
Taunton	77	148	13	4	21	5	268
Wellington	23	71	9	3	11	5	122
Wells	46	85	9	3	16	1	160
Williton	47	73	15	6	20	6	167
Wincanton	79	168	10	4	10	2	273
Yeovil	134	284	41	16	16	3	494
Totals :	992	2,551	365	137	371	95	4,511
URBAN							
Bridgwater	138	338	55	23	61	7	622
Burnham	28	70	9	2	9	1	119
Chard	14	60	9	3	10	1	97
Clevedon	65	138	14	2	14	6	239
Crewkerne	13	38	4	1	2	—	58
Frome	56	169	21	4	10	1	261
Glastonbury	36	56	4	2	3	1	102
Ilminster	8	29	—	1	—	—	38
Keynsham	15	120	38	14	21	3	211
Minehead	23	56	4	3	4	2	92
Norton Radstock	62	195	21	7	35	4	324
Portishead	26	64	8	2	11	3	114
Shepton Mallet	7	46	15	4	18	2	92
Street	52	87	2	1	7	3	152
Taunton	146	369	39	15	65	18	652
Watchet	11	16	2	—	1	—	30
Wellington	31	79	10	1	5	2	128
Wells	35	75	3	1	8	2	124
Weston-super-Mare	117	386	41	17	55	6	622
Yeovil	196	312	28	8	31	3	578
Totals:	1,079	2,703	327	111	370	65	4,655
County Totals:	2,071	5,254	692	248	741	160	9,166

POLIOMYELITIS VACCINATION

Reinforcing Doses

Number of children who received a reinforcing dose during the year ended
31st December, 1966

DISTRICT	Children born in the years :—					Others under age 16	Total
	1966	1965	1964	1963	1959-62		
RURAL							
Axbridge	—	—	6	1	400	32	439
Bathavon	—	1	1	—	186	15	203
Bridgwater	—	1	1	—	322	56	380
Chard	—	—	—	—	148	37	185
Clutton	—	—	—	—	189	103	292
Dulverton	—	—	—	—	44	4	48
Frome	—	—	—	—	67	9	76
Langport	—	—	—	—	225	34	259
Long Ashton	—	—	1	—	478	13	492
Shepton Mallet	—	—	2	1	115	22	140
Taunton	—	—	—	—	229	25	254
Wellington	—	—	—	—	107	6	113
Wells	—	2	6	—	127	62	197
Williton	—	—	—	—	141	21	162
Wincanton	—	—	—	—	125	21	146
Yeovil	—	—	—	—	261	25	286
Totals :	—	4	17	2	3,164	485	3,672
URBAN							
Bridgwater	—	—	—	—	256	19	275
Burnham	—	3	21	5	91	17	137
Chard	—	—	—	—	70	2	72
Clevedon	—	—	—	—	119	2	121
Crewkerne	—	—	—	—	63	3	66
Frome	—	—	—	—	176	2	178
Glastonbury	—	—	1	—	97	3	101
Ilminster	—	—	—	—	45	1	46
Keynsham	—	—	—	—	196	111	307
Minehead	—	—	—	—	71	2	73
Norton Radstock	—	—	—	—	161	47	208
Portishead	—	—	—	—	138	5	143
Shepton Mallet	—	—	—	—	47	1	48
Street	—	—	—	—	102	—	102
Taunton	—	—	—	—	459	123	582
Watchet	—	—	—	—	54	2	56
Wellington	—	—	—	—	104	6	110
Wells	—	1	9	1	93	53	157
Weston-super-Mare	—	1	6	3	456	17	483
Yeovil	—	—	—	—	254	29	283
Totals :	—	5	37	9	3,052	445	3,548
County Totals :	—	9	54	11	6,216	930	7,220

AMBULANCE SERVICE

GENERAL

In 1966 the total number of patients carried rose by 5,104, an increase of approximately 2.3%. The mileage increased by 40,734 miles, i.e. approximately 2.5%.

The very useful arrangements with the St. John Ambulance Brigade and the British Red Cross Society whereby members assist at certain Ambulance Stations or provide and man ambulances for hire, have continued. The following table gives details of patients and mileages. Figures for the year 1965 are shown for comparison.

1965	Patients	Mileage	Average Distance travelled per patient (miles)
Ambulances	71,410	617,707	8.65
Sitting-case ambulances ...	122,723	875,635	7.14
Cars	21,528	130,938	6.08
Totals — Service Vehicles ...	215,661	1,624,280	7.53
Hospital Car Service	851	3,024	3.55
Private Hire (ambulances and cars)	966	14,455	14.96
All Vehicles	217,478	1,641,759	7.55
1966			
Ambulances	71,465	640,453	8.95
Sitting-case ambulances ...	132,172	907,150	6.86
Cars	16,273	112,754	6.92
Totals — Service Vehicles ...	219,910	1,660,357	7.55
Hospital Car Service	2,249	11,571	5.14
Private Hire (ambulances and cars)	423	10,565	25.00
All Vehicles	222,582	1,682,493	7.56

CONTROL

The Group Control system continued unchanged. The new Ambulance Station and Control at Shepton Mallet is now being built and, as stated in the 1965 Report, when completed the Group Control for the North East Somerset area will be transferred from Glastonbury.

The pressure on the Controls continues to increase. Arrangements are in hand to replace the existing telephone installation at the South West Somerset Control by improved equipment.

The number of vehicles in the four control areas at 31st December was as follows. All of these are equipped with radios.

Control Area	Ambulances	Dual-purpose Sitting-case Ambulances	Cars	TOTAL
Group 1 Taunton (South West Somerset)	13	11	1	25
Group 2 Weston-super-Mare (North West Somerset)	14	10	1	25
Group 3 Glastonbury (North East Somerset)	8	14	1	23
Group 4 Yeovil (South East Somerset)	4	6	1	11
TOTALS	39	41	4	84

STAFF

From 3rd January the basic working week for ambulance men was reduced to 40 hours. The tours of duty worked by Ambulance Station employees were reviewed and all tours were amended to a five-day week each day of 8 hours duration.

The difficult staffing situation referred to in my last report continued until the end of June. Between 1st January and 30th June 18 appointments were made; 9 to fill vacancies which existed at 31st December, 1965, and 9 to fill further vacancies caused by staff resignations. The situation generally then improved and during the period from 1st July to 31st December only 3 vacancies occurred, and these were filled. At 31st December the only vacancies in the Service were at Clevedon/Portishead and Frome, where difficulties in recruitment continue.

The authorised establishment at 31st December, 1966, was 155:—

Ambulance Station	Station and Sub-Officers	Senior Drivers	Leading Drivers	Driver/ Attendants	Totals
Bridgwater	—	1	1	5	7
Castle Cary	—	1	—	3	4
Churchill	—	1	1	5	7
Clevedon/Portishead	—	2	1	11	14
Frome	—	1	—	2	3
Glastonbury	3	—	—	7	10
Highbridge	—	—	1	2	3
Ilminster	—	1	—	2	3
Keynsham	—	1	1	5	7
Minehead	—	1	1	6	8
Norton Radstock	—	1	1	7	9
Shepton Mallet	3	—	1	6	10
Taunton	5	—	4	20	29
Weston-super-Mare	5	—	4	16	25
Yeovil	3	—	2	11	16
TOTALS	19	10	18	108	155

VEHICLES

Because of the increasing demands made on the Service and the delays which are being encountered, it was necessary during the year to provide an additional ambulance. If the present trends continue further increases will be necessary. At 31st December, 1966, the total authorised establishment was 84 vehicles, as follows:—

Ambulance Station	Ambulances	Dual-Purpose Sitting-Case Ambulances	Cars	Totals
Bridgwater	2	2	—	4
Castle Cary	1	2	—	3
Churchill	2	2	—	4
Clevedon/Portishead	5	3	—	8
Frome	—	1	—	1
Glastonbury	2	3	1	6
Highbridge	2	1	—	3
Ilminster	2	1	—	3
Keynsham	1	3	—	4
Minehead	2	2	—	4
Norton Radstock	2	3	—	5
Shepton Mallet	3	4	—	7
Taunton	7	5	1	13
Weston-super-Mare	5	4	1	10
Yeovil	3	5	1	9
TOTALS	39	41	4	84

During the year new vehicles were delivered as follows :—

6 ambulances for use at the Bridgwater, Clevedon, Norton Radstock, Taunton, Weston-super-Mare and Yeovil Stations.

6 dual-purpose sitting-case ambulances for use at the Churchill, Keynsham (2), Shepton Mallet, Taunton and Weston-super-Mare Stations.

HOSPITAL CARE SERVICE AND HIRE

The use of the Hospital Car Service has continued, and because additional drivers have been recruited the total mileage has increased.

The ambulance hire arrangements with the St. John Ambulance Brigade and the British Red Cross Society continue, and with the Hospital Car Service form a useful supplement to the County Service.

AIR AND RAIL TRAVEL

As the table below shows, despite the curtailment of services good use is made of rail facilities for the conveyance of both stretcher and sitting cases over long journeys. During the year the British Railways Board varied the financial arrangements, and from 1st April, 1966 the charge for the exclusive use of a compartment was increased to 3s. 0d. per mile first class or 2s. 0d. per mile second class. A reservation fee of 3s. 0d. is charged for each seat reserved for patient or escort where the exclusive use of a compartment is unnecessary. Under these new arrangements it is hoped that the facilities

provided by British Rail for the conveyance of Ambulance Service patients will still be available. Again we are indebted to the volunteers who so willingly act as escorts of patients sent by rail.

	Stretcher		Sitting		Totals	
	Patients	Mileage	Patients	Mileage	Patients	Mileage
1965	200	23,697	640	50,310	840	74,007
1966	167	21,537	615	51,951	782	73,488

Total equivalent Road Mileages:-

1964 – approximately 196,000
 1965 – approximately 148,000
 1966 – approximately 146,900

During the year one patient was moved by helicopter from Weston-super-Mare to Stoke Mandeville Hospital.

PREMISES

The building of the new Ambulance Station and Control at Shepton Mallet has commenced and it is hoped that the building will be ready for occupation in July 1967.

CO-OPERATION WITH OTHER SERVICES

I am pleased to report that there is the closest possible co-operation between the Ambulance Service and other Emergency Services throughout the County.

CHIROPODY

The expansion of the Chiropody Service since its inception six years ago is clearly shown by the figures in the following table:—

Year	No. of Chiropodists accepting patients	New cases	No. of treatments given		Total
			Surgery	Domiciliary	
1961	18	923	9,013	1,762	10,775
1962	26	790	10,730	2,168	12,898
1963	28	1,516	12,089	4,067	16,156
1964	42	2,574	24,903	6,737	31,640
1965	45	1,902	31,718	11,725	43,443
1966	48	2,284	36,054	14,212	50,266

During the past year there has been no major change in the organisation of the Service which aims at providing treatment for the elderly, physically-handicapped and expectant mothers on medical recommendation. We have been fortunate in obtaining the services of 3 more Chiropodists, bringing the total up to 48.

The patient's contribution towards the cost of treatment continues at 2s. 6d. for a surgery treatment, and 5s. 0d. for a domiciliary treatment, but in cases of hardship this latter can be reduced to 2s. 6d.

Many elderly folk continue to get their treatment through the Clubs, and during the year five more Clubs applied for a grant, bringing the total number of Clubs now running a Chiropody clinic up to 45. Treatment on a sessional basis is also being continued in 22 Homes for the Elderly at the request of the County Welfare Committee.

MENTAL HEALTH SERVICES

GENERAL

The changes imposed by the Mental Health Act, 1959, especially the emphasis on community care continue to place a tremendous burden on the Local Health Authority. The development of the Mental Health Services which in financial terms has led to a ten-fold increase in expenditure in the past decade appreciably slowed in tempo during the year because at national level limits were placed on public expenditure.

Despite this the efforts of previous years have been consolidated, training of staff has continued and arrangements made for the provision of capital projects such as hostels and adult Centres so that when the financial stringencies are relaxed, further delay will be minimal.

Once again co-operation with the hospital service, general practitioners and the various voluntary organisations has been excellent.

STAFFING

The field staff are organised on an area basis, and at the end of the year a Superintendent Mental Welfare Officer, five Area Mental Welfare Officers, three Senior and fifteen Mental Welfare Officers were in post. Of these, ten hold post graduate social science diplomas or the newer certificates in social work. Four hold psychiatric social worker qualifications, and two officers will complete qualifying courses in 1967.

The staff of the Training Centres at the end of the year comprises six Head Teachers, five Managers, twenty teachers and nine instructors. In addition, each junior centre has a nursery attendant.

Five trainee teachers have been seconded to approved Diploma Courses.

CARE AND AFTERCARE

Table 1 below gives the number of visits made in connection with the care of the mentally disordered in the community.

Table 1

Guardianship	Aftercare		Other Visits	Total
	Subnormal	Mentally Ill		
531	4,618	9,354	6,813	21,316

The following table shows the number of visits made during the preceding five year period.

Table 1

Year	Guardianship	Aftercare		Other visits Social Histories	Total
		Subnormal	Mentally Ill		
1961/62	1,018	3,599	5,874	3,936	14,427
1962/63	770	3,721	6,922	4,554	15,967
1963/64	604	3,697	8,725	5,421	18,447
1964/65	465	3,854	10,674	6,470	21,463
1965/66	441	4,294	10,516	7,874	23,125

The number of patients referred to the Local Health Authority during the year ended 31st December, 1966, is given in Table 2 below.

Table 2

Referred by	Mentally Ill		Psychopathic		Subnormal		Severely Subnormal		Total	
	under 16	16 and over	under 16	16 and over	under 16	16 and over	under 16	16 and over	under 16	16 and over
(a) general practitioners	4	627	—	4	1	6	1	5	6	642
(b) Hospitals, on discharge from in-patient treatment	—	466	—	4	4	13	—	3	4	486
(c) Hospitals, after or during out-patient or day treatment	—	220	—	—	4	8	—	—	4	228
(d) Local Education Authority	—	—	—	—	8	2	25	4	33	6
(e) Police courts	1	72	—	9	—	4	—	—	1	85
(f) Other sources	3	200	—	10	18	97	24	25	45	332
(g) Total	8	1,585	—	27	35	130	50	37	93	1,779

HOSPITAL ADMISSIONS

The admission to hospitals for the mentally ill continue to be mainly on an informal basis. Mental Welfare Officers were concerned in 837 hospital admissions, as follows:—

Table 3

Hospital	Informal	Sect. 25	Sect. 26	Sect. 29	Sect. 60	Total
Tone Vale	304	99	35	38	1	477
Mendip	147	99	19	7	—	272
Glenside & Barrow	14	41	11	1	—	67
Other	13	6	1	1	—	21
Total	478	245	66	47	1	837

In addition 52 were admitted to hospitals for the subnormal and at 31st December there were 19 on the waiting list, of whom 12 were considered urgent cases.

In October, 1966, the Ministry of Health drew attention to the fact that a high proportion of compulsory admissions to hospitals of mentally disordered patients was effected under the short-term powers of Section 29 of the Mental Health Act, 1959. The Regional Hospital Board had also raised this matter in December, 1965. The number of patients admitted to Psychiatric Hospitals from the area of this Local Health Authority under Section 29 in the years ended 31st December, 1964, and 1965, were 209 and 188 respectively. In January 1966 consultations were held with the Consultant Psychiatrists and arrangements were put in hand to ensure that Section 29 of the Mental Health Act was operated strictly in accordance with the provisions of the Section. As a result, the number of compulsory emergency admissions under Section 29 during the year ended 31st December, 1966, was reduced to 47.

HOSTELS AND RESIDENTIAL ACCOMMODATION

The Cliffe View Hostel at Cheddar continues to meet the need for residential accommodation for up to 12 young women, most of whom are in daily employment. In the first five year period from June 6th, 1961, some 67 subnormal girls have been resident at the hostel for rehabilitation, most of whom have been suitably placed in the community. In addition 34 young women have been admitted for holidays, or convalescence or because of domestic crises.

The Croftlands Hostel at Bridgwater is expected to be available early in 1967. It will accommodate up to ten young men capable or potentially capable of employment.

The Yeovil Training Centre Hostel provides places for 22 children and also accommodates short-stay boarders during part of the holiday periods. The arrangements for the accommodation of five Training Centre boarders at St. Margaret's, Weston-super-Mare, terminated in December, 1966.

During the year temporary residential care to relieve the family was arranged for 81 subnormal persons, of whom 22 were accommodated in hospitals under Circular 5/52, 52 in Local Authority hostels, and 7 at St. Margaret's, Weston-super-Mare.

A property known as "Burton's Orchard" at Taunton has been purchased and adapted for use as a working hostel for recovering mentally ill (13 to 18 places) and is expected to be opened in June 1967.

Local Authority hostel provision continues to be supplemented by a boarding out scheme under which elderly mentally infirm persons on discharge from hospital are accommodated in private or voluntary homes. During the year boarding out grants were made for 110 patients.

DAY CENTRES AND SOCIAL CLUBS

There has been continued co-operation with the Tone Vale Hospital Management Committee in social work connected with the social health centres at Ivor House, Taunton, and Penn House, Yeovil. The secondment of Mental Welfare Officers to these Centres is supplemented by attendance at hospital case conferences.

The arrangements with the Bath Local Health Authority for the attendance of Somerset patients at their Occupational Therapy Centre continues to make a useful contribution to the aftercare facilities in that area.

Fourteen voluntary social clubs for mentally disordered persons are now assisted by grants from the Local Health Authority.

TRAINING CENTRES

There is urgent need for expansion of the work and training facilities, and the Local Societies for the Mentally Handicapped are providing funds for additional workshop and other accommodation at the Glastonbury Junior/Adult Training Centre and at the Taunton, Weston-super-Mare and Yeovil Adult Training Centres. A similar scheme is in hand for the Bridgwater Adult Training Centre.

There has been a progressive increase in the number of pupils attending Junior and Adult Traing Centres. Table 4 shows the number on the registers as at 31st December, 1966.

Table 4

Centre	Registered Pupils				Total
	Under 16 years		Over 16 years		
	Male	Female	Male	Female	
Bridgwater Junior	17	16	—	—	33
Bridgwater Adult	—	—	21	15	36
Glastonbury	12	9	12	8	41
Radstock Hilltop Junior	27	12	—	—	39
Radstock Hilltop Adult	—	—	31	25	56
Taunton Selworthy Junior	24	12	—	—	36
Taunton Adult	—	—	26	21	47
Weston-super-Mare Baytree Junior	35	25	—	—	60
Weston-super-Mare Winterstoke Adult	—	—	10	21	31
Yeovil Junior	23	19	—	—	42
Yeovil Adult	—	—	20	17	37
Bath	1	2	2	1	6
Farleigh Hospital (Yatton Ward)	—	—	9	6	15
	139	95	131	114	479
	234		245		

HOME TEACHING

A part-time Home Teacher is employed for pupils mainly in the Exmoor area who are unable to attend Training Centres.

VOLUNTARY ORGANISATIONS

The County Council is affiliated to the National Association for Mental Health, and also co-operates with the Somerset Association for Mental Welfare and with other local Societies in matters concerning community care and the training of the mentally handicapped.

WATER SUPPLY

The Ministry of Housing and Local Government, in revising the by-laws for the prevention of waste and excess consumption, mis-use or contamination of water, has taken the opportunity to remind water undertakers that by-laws which differ from the Model are unlikely to be confirmed, the aim being to obtain uniformity throughout the Country.

There is now a constant emphasis on the need for the conservation of water and many industries are actively pursuing the possibility of reclaiming water. For example, in Somerset two dairy concerns have now installed water reclamation plant which, together, are capable of saving 8,400,000 gallons of water per annum. Further details of these plants are set out in page 72.

The following is an extract from the report on the weather of 1966, issued by the Somerset River Authority:

"October was the wettest month of the year with 5.43 inches and was a complete contrast to October 1965, which was the driest since our records began in 1941, with 0.61 inches. January, March and September were exceptionally dry and July, November and December were drier than average. February, April, May, June, August and October were wetter than usual with April being the wettest for 26 years."

SOMERSET WATER UNDERTAKERS

The following are extracts from reports kindly provided by the three water undertakers in Somerset:

WESSEX WATER BOARD

Springs and boreholes at last appear to have recovered to provide the quantity of water which they gave before the long dry spell around 1964. The average demand has risen from 7.25 m.g.d. in 1965 to 7.55 m.g.d. The population in the Board's area of supply is now 126,000 of whom the Board supplies about 125,000.

As the usage of water increases, difficulties have been experienced in a few places due to inadequacy of mains. Improvements have been completed at Martock and Long Load and in Yeovil and are due to be completed during 1967 at South Petherton, Misterton, Tintinhull and Milborne Port. Corrosion products from old cast iron mains also tend to be troublesome in areas suffering low pressure because although flushing is carried out regularly, the flow is insufficient to clear the deposits which instead periodically appear through consumers' taps. Some parts of the Board's Central District have been troublesome in this respect for many years. Trials are now being carried out on a pilot scale involving treatment to loosen the deposits which are then removed by forcing foam plastic "swabs" through the affected pipes. This procedure is quite expensive and causes considerable inconvenience to consumers (while in progress) but it is hoped that the trials will provide experience in reducing this to the minimum when larger areas are dealt with.

New District Offices and Depots have been completed at Wincanton and Combe St. Nicholas, Chard, and a new sub-office is under construction in Ilminster.

The Board's Capital Works Programme is progressing. Additional water will be available early in 1967 when the scheme for developing the existing lake boreholes, near Thornford, is commissioned. Test pumping carried out during 1966 at existing boreholes at Bradley Head and Compton Durville has confirmed that these sources are capable of development to provide extra water if the necessary licence can be obtained from the River Authority and this matter is now being pursued.

Investigations into a major source to cater for long-term demands have been carried out; a feasibility study with site geological exploration has shown the practicability of a proposal to construct an impounding reservoir near Melbury Osmond, which would provide a net yield when fully developed, of about $6\frac{1}{2}$ m.g.d. Alternative proposals to obtain a similar quantity of water from boreholes in the chalk in the general area of Dorchester are also being studied.

BRISTOL WATERWORKS COMPANY

Work carried out in this Company's area of supply included the construction of the two concrete service reservoirs at Glastonbury and Rodney Stoke; the reconstruction of Honeyhurst Pumping Station and the laying of a new main to link the existing Rodney Stoke main to the new Glastonbury Reservoir as part of the North Somerset Augmentation Scheme. New water towers were built at Binegar and Slabhouse and new pumps installed at Brent Knoll Pumping Station to augment the water supply to the Burnham-on-Sea, Brean, Berrow and surrounding districts. In addition booster stations were sited at Huddox Hill, High Littleton, Berrow, Draycott and Peasedown St. John and improvements to the supplies to Wells City were carried out by a new main laid at Hawkers Lane. Extensions to the Cheddar Treatment Works and reconstruction of the Rowberrow Treatment Works are in progress.

Details of mains laid during 1966 are as follows:-

	Length of Mains — in Yards								
	1½"	3"	4"	6"	8"	10"	12"	15"	TOTAL
TRUNK MAINS									
RURALS									
Axbridge	—	—	—	11	—	1,013	2,061	17	3,102
Wells	—	—	—	—	2,399	—	—	—	2,399
BOROUGHES AND URBANS									
Glastonbury	—	—	—	—	—	—	363	1,778	2,141
Norton Radstock	—	—	—	1,014	—	—	—	—	1,014
Street	—	—	—	—	—	—	234	340	574
Wells	—	—	—	—	506	—	—	—	506
TOTALS	—	—	—	1,025	2,905	1,013	2,658	2,135	9,736
TAPPING MAINS									
RURALS									
Axbridge	200	2,239	1,971	—	—	—	—	—	4,410
Bathavon	—	830	—	—	—	—	—	—	830
Clutton	—	1,407	585	—	—	—	—	—	1,992
Long Ashton	290	1,324	1,724	2,108	181	—	—	—	5,627
Shepton Mallet	—	295	147	—	—	—	—	—	442
Wells	—	180	84	—	—	—	—	—	264
BOROUGHES AND URBANS									
Burnham-on-Sea	—	810	576	—	—	—	—	—	1,386
Clevedon	—	428	317	—	—	—	—	—	745
Frome	—	1,161	409	387	420	—	—	—	2,377
Keynsham	—	132	202	398	289	—	—	—	1,021
Norton Radstock	—	930	1,154	135	—	—	—	—	2,219
Portishead	—	761	852	—	191	—	—	—	1,804
Shepton Mallet	—	—	387	302	—	—	—	—	689
Street	—	268	453	664	—	—	—	—	1,385
Glastonbury	—	28	100	—	—	—	—	—	128
Wells	—	234	608	—	—	—	—	—	842
Weston-super-Mare	—	2,911	1,675	969	100	—	—	—	5,655
TOTALS	490	13,938	11,244	5,988	4,086	1,013	2,658	2,135	41,552

In addition to the above, 1,286 yards of various diameter mains were laid by way of renewal.

WEST SOMERSET WATER BOARD

Works carried out, in course of construction, or proposed, are as follows:—

Bridgwater Area

Holford	New mains to the village and a pumped supply of Clatworthy water to replace existing small source.
Durleigh	Tenders invited for new farm buildings.
Ashcott	New 6" main Polden Reservoir to Ashcott completed.
Stringston/ Dodington	Small diameter mains replaced.
Radlett	4" link main Nether Stowey to Radlett.
Durleigh	Commencement of new 15" main (from Dancing Hill) to high-level area for new development..
Shurton/ Burton/Lilstock	Work commenced on replacement of small diameter pipes.
Greinton	Improvements to distribution systems.

Taunton Area

Hatch Beauchamp	Replacement and extension of mains to Capland.
Bickenhall	Replacement of small diameter mains to West Hatch.
Thornfalcon	Stage II of 6" main to North Curry
Staplegrove	Extension of main to Tanyard and Burlands 4" and 3".
Wrangway	Extension of 4" mains to Wrangway and Sampford Moor and elimination of small source.
North Curry	Work commenced on replacement of main in the North Curry area to eliminate dirty-water problems.

Minehead Area

Wootton Courtenay	This village was linked to Timberscombe to overcome supply problems.
Brompton Regis	New springs were developed to augment the existing source.
Borehole — Washford	Investigation of ground water continued in the Washford area.
Carhampton/ Withycombe	Water supplies to these areas were taken over from the Crown Estate and new main laid to improve supplies including Blue Anchor.
Brushford	The existing 2" link Dulverton to Brushford was replaced with a 4" main.

BACTERIOLOGICAL SAMPLE RESULTS

The average results of supply samples reflect a reasonably high standard of bacteriological quality. The larger supplies show a 95.5 per cent satisfactory classification.

Of the smaller rural supply samples, those chlorinated gave a 97 per cent satisfactory classification and those sources not chlorinated gave a 74 per cent satisfactory classification.

Details of samples taken:-

Larger supplies	...	...	...	...	...	...	350
Smaller supplies (a) Chlorinated	...	...	...	...	...	...	202
(b) Not chlorinated	...	...	...	...	...	...	62
							<u>614</u>
Samples taken following complaints	...	...	...	...	...	...	18
Total samples taken during the year	...	...	...	...	...	...	<u>632</u>

OTHER SAMPLES

Private	...	...	...	...	...	...	11
New mains	...	...	...	...	...	...	57
							<u>700</u>
							<u><u>700</u></u>

Schemes approved under the Rural Water Supplies and Sewerage Acts, 1944-65 during the year were as follows:-

Rural District	Scheme	Estimated Cost (as submitted)		
		£	s.	d.
Bridgwater	West Somerset Water Board - North Petherton, Bell Inn area - Mains extension	900	0	0
Chard	Wessex Water Board - Combe St. Nicholas, Northay Water extension	3,900	0	0
Chard	Wessex Water Board - Combe St. Nicholas, Stantway and Northay Water extension (amended scheme)	7,770	0	0
Long Ashton	Bristol Waterworks Co. - North Weston, Clapton Lane - Water extension	600	0	0
Shepton Mallet	Bristol Waterworks Co. - East Pennard Water extension	364	0	0
Taunton	West Somerset Water Board - Kingston St. Mary, Nailsbourne - Pyrland Gate extension	2,250	0	0
Taunton	West Somerset Water Board - Bishops Lydeard, Dean Cross, Rose Cottage Inn extension	2,450	0	0
Taunton	West Somerset Water Board - Blagdon Hill, Culmhead - Water main extension	17,000	0	0
Taunton	West Somerset Water Board - Yarford, Kingston St. Mary - Water mains extension	750	0	0
Williton	West Somerset Water Board - Timberscombe - Wootton Courtenay, Ramscombe - link main	4,450	0	0
	TOTAL	£40,434	0	0

WATER SAMPLES

Classification of raw and treated water samples submitted for bacteriological and chemical examination by local authorities are shown in the following Table. The water undertakers also check on raw and treated supplies as a matter of routine.

	Raw Water				Treated after going into supply			
	Bacteriological		Chemical		Bacteriological		Chemical	
	No. taken	Satisfactory	No. taken	Satisfactory	No. taken	Satisfactory	No. taken	Satisfactory
Boroughs and Urbans	154	84	45	45	658	636	231	220
Rurals	390	203	42	40	654	605	96	94
Totals	544	287	87	85	1,312	1,241	327	314

The following figures refer to samples taken from well water supplies:-

	Boroughs and Urbans		Rurals	
	No. Taken	Satisfactory	No. Taken	Satisfactory
Bacteriological	4	2	360	150
Chemical	—	—	2	—

SEWAGE DISPOSAL

The Royal Commission on Sewage Disposal, recognising the need for a definition of a good effluent, suggested a standard which has remained and certainly has been accepted as reasonable, for the past fifty years or so. It came to be known as the 30/20 standard (solids in suspension should not exceed 30 p.p.m. and the biochemical oxygen demand in five days (B.O.D.) should not exceed 20 p.p.m.) and the Commission, in arriving at this figure, had assumed that in general effluent discharged into a flow of natural water would be diluted at least eightfold.

A point has now been reached where this standard must receive critical appraisal for it has become very evident that flows in rivers have diminished considerably due to a rise in the consumption of water and the corresponding increase in the amount of sewage.

In order to assist river and local sewage authorities, the Ministry of Housing and Local Government have issued a Technical Memorandum which deals particularly with this problem and in instances where a more restrictive standard is appropriate.

In some parts of the country the situation has become very serious as the proportion of diluting water for effluent has diminished to such an extent that effluent constitutes a greater part of the flow in the river in dry weather.

Details regarding schemes completed or still in progress as at 31st December, 1966, are set out below. Financial particulars of schemes approved by the County Council during the year are shown on page 59.

BOROUGHES AND URBAN DISTRICTS

BRIDGWATER. The District Council have not yet embarked on their proposals for the construction of a sewage disposal works, but this has been placed in priority group 1. Also on the list of priorities is the construction of pumping stations, pumping mains and new gravity sewers to link existing outfalls to the disposal works. These latter proposals are estimated to cost £600,000. Work in progress at the end of the year comprised the provision of new sewers for an industrial site and for housing development.

BURNHAM-ON-SEA. Work is in progress on various private estate developments, and in the provision of pumping stations to serve future comprehensive main drainage schemes generally for the Urban District. The construction of pumping stations and tank sewers is a joint venture between private developers and the Local Authority. The Council have submitted their proposals for a comprehensive sewerage scheme to the Ministry of Housing and Local Government for "approval in principle", but as already mentioned, certain works in connection with this scheme are in progress. It is estimated that the major scheme will cost £800,000.

CHARD. At a cost of approximately £70,000, the Council have now completed their scheme to link Holbear with the sewage works taking in the industrial area of Chard. Remodelling of the sewage disposal works is still in progress (£104,000).

CREWKERNE. The laying of the foul water sewer to South Street to serve the Park Estate Development (600 houses) has now been completed (£30,000).

GLASTONBURY. No new works or improvements were carried out during the year, although the Council, under future proposals, intend to provide a sewage pumping station and pumping main adjoining Paradise Allotments to take drainage of a housing development scheme at an estimated cost of £7,350.

KEYNSHAM. No new works or improvements were carried out during the year, although further progress has been made in connection with the relaying of sewers and the construction of a pumping station for the western area of the District. A scheme is now in course of preparation for the improvement of the disposal system for the eastern area of Keynsham.

MINEHEAD. Work is now in progress on the eastern outfall relief sewer. In 1964 a Ministry investigation was held in connection with the main drainage scheme for the Urban District. The scheme was then estimated to cost £363,000.

NORTON RADSTOCK. Work about to be commenced at the end of 1966, comprised the provision of a main drainage scheme to enable several properties in the Wheelers Hine and Midsomer Norton area at present on septic tanks, to be connected to the sewer (estimated cost £1,500.) The present disposal system, which is not efficient, is to be improved and under future proposals, the Council have made provision for the reconstruction of the Midsomer Norton works, for which a tender amounting to £16,500 has been accepted. There is to be a major scheme carried out affecting the Radstock Works including provision of trunk sewers (£225,000).

PORTISHEAD. No new works or improvements were carried out during the year. In order of priority schemes are proposed for the following:—

1. Construction of a 48-inch surface water sewer to drain Welland Lane, Gordano School and Clevedon Road areas. (Estimated cost £18,000).
2. Construction of a 30-inch surface water sewer to drain Dry Hill area (£29,000).
3. Possible construction of sewage disposal works for the whole District. (Estimated cost £330,000).

STREET. The Council have completed their experiments at the sewage works, which included provision of an aeration plant and other minor improvements. The installation of a spray irrigation unit is still in progress. In order to cater for an increase in population, it is proposed to carry out certain extensions of the works and increase sewers where necessary.

TAUNTON. Numerous works have been completed during the year at an estimated cost of £43,000. The Borough Council have the following schemes under consideration: (1) Resewering of the Borough (£100,000); (2) Provision of sewers in Lower Staplegrove Road (£100,000); (3) Extension of the Ham sewage disposal works (£150,000); (4) Resewering of the Mountfields area (£20,000).

WESTON-SUPER-MARE. Improvements to the existing sewerage system are still in progress. Further modifications and improvements are to be carried out at a later date.

YEOVIL. Stage I of the main drainage scheme, which makes provision for new surface water sewers and renewal of part of the trunk foul sewer, has now been completed (£98,000). Stage III is now in progress (renewal of foul sewer of 4 ins. and 48 ins. diameter pipe and 54 ins. diameter tunnel) and Stages II and IV will be commenced at a later date. Stages II, III, and IV are estimated to cost £662,000.

RURAL DISTRICTS

AXBRIDGE. Extensions of sewers, new works, or improvements completed during the year were as follows:

- (1) Bleadon sewerage scheme completed at an estimated cost of £55,347;
- (2) Phase one of the Hutton, Locking and Banwell sewerage scheme (Hutton and Locking were served by late March, 1966) at an estimated cost of £68,979;
- (3) South Berrow sewerage scheme — system commenced operation March, 1966 (£28,000).

In addition to the above, the Council started work on the Banwell to Langford Regional Sewerage Scheme (£160,000).

Included in the Council's future programme and in order of priority is the provision of a sewerage and sewage disposal scheme for Kewstoke (£172,000), provision of sewers in Sandford, Churchill, and Langford (£70,000); installation of new sewage disposal works at Cheddar (£60,000); and finally a sewerage scheme for the Brent area.

BATHAVON. Work continues on the resewering and provision of new disposal works at Wellow (£47,776). The District are still awaiting Ministry sanction to the scheme for sewerage New Buildings and Carlingcott (£39,000). Included in the Council's future programme and in order of priority is the provision of a sewerage and sewage disposal scheme for Marksbury and Compton Dando for which plans are in course of preparation, and a sewerage and sewage disposal scheme for Hinton Charterhouse. Schemes are also under consideration for Tunley, Camerton Village and Upper Swainswick.

BRIDGWATER. The sewerage and sewage disposal scheme for the parishes of East Huntspill, Woolavington and Cossington has now been completed and a start made on that for Sutton Mallet (Stawell Parish). At Wembdon a new foul sewer has been provided together with other improvements at a total estimated cost of £29,400. Further schemes are proposed and these are concerned with the parishes of Shapwick, Nether Stowey, North Petherton, Middlezoy and Othery.

CHARD. No new works, extensions or improvements were completed during the year. Nevertheless, progress is being made in connection with the sewerage and sewage disposal schemes for Combe St. Nicholas and Wadeford (£82,340), and Dowlish Wake (£41,370), also the provision of sewers for Forton, Coombses, Tatworth (£18,473). Under future proposals, the District Council have included the following schemes: (1) Merriott — part sewers and sewage disposal works (£100,000); (2) Shepton Beauchamp — reconstruction of sewage disposal works (£2,000); (3) Winsham — disposal works (£5,000); (4) Mister-ton — disposal works (£10,000).

CLUTTON. Apart from various extensions to private housing estates, the Council have made further progress on their scheme for High Littleton, Hallatrow and Timsbury. This scheme also provides for the enlargement of the sewage disposal works at Paulton (£220,368). With regard to future proposals, plans have already been prepared for sewerage and sewage disposal schemes at Farrington Gurney (Temple Cloud village) (£164,000) and Chew Stoke (£165,000). Pensford, Ston Easton, West Harptree and Clutton (part) are now under review for the provision of works and/or sewers.

DULVERTON. Although no new works or improvements were carried out during the year, it is anticipated that the sewerage and sewage disposal scheme for Winsford (£33,000) will be commenced in April, 1967. As mentioned last year, the original proposals for Bridgetown and Exton were abandoned, but a new scheme concerning Bridgetown only is now under consideration (£25,000). The District Council have asked their Consulting Engineers to prepare a report on the adequacy of the existing works at Dulver-ton.

FROME. In addition to the provision of major schemes for Wanstrow and Leigh-on-Mendip in 1965, the Council now report that the sewerage and sewage disposal proposals for Upton Noble (£32,000) have also been completed. With regard to the proposals for Faulkland, where the new system is to be connected to the existing works at Norton St. Philip, it is anticipated that work will commence on this project in 1967 (£40,000). It will be remembered that major schemes were to be considered for Witham Friary and Trudoxhill, but following reconsideration of the proposals it has been decided that the best method of draining these two parishes is to connect them to the existing works at Nunney (£90,000).

LANGPORT. In 1966 the County Council approved a sewerage and sewage disposal scheme for the Parish of Fivehead at an estimated cost of £92,200. The Fivehead works are included in the Western sewerage area of the Council's comprehensive scheme and when completed will serve nine villages. The works are designed to permit development by unit construction, as the sewerage systems within the Western district are constructed. A visit of investigation by a Ministry of Housing and Local Government engineering inspector was carried out in November in connection with the whole comprehensive scheme and approval of the proposals is awaited. Tenders are shortly to be invited in connection with the provision of a relief outfall sewer at Curry Rivel (£4,746).

LONG ASHTON. The renovation of the sewage treatment works at North Weston reported last year, have now been completed at a cost of £3,000, as has also the provision of a sewer extension along Plunder Street, Cleeve (£3,500). The following is a list of this Authority's future proposals:-

		Approximate Cost
Trunk Sewer Proposals — The provision of trunk sewer with treatment works at Kingston Seymour to serve Backwell, Nailsea, Wraxall, Tickenham, Flax Bourton, Yatton, etc. (referred to as the Yeo Valley Main Drainage Scheme).		£2,300,000
Other Schemes		
Wraxall (Failand)	— Sewage for the 60 'acres' area, using the existing Tyntesfield treatment works	£55,000
Weston-in-Gordano	— Sewerage and sewage disposal scheme	£15,000
Long Ashton (Leigh Woods)	— Sewerage and sewage disposal scheme	£35,000
The Gordano Valley Drainage Scheme	— Provision of sewer to serve Easton-in-Gordano, Portbury, North Weston, Portishead, etc.	—

SHEPTON MALLET. The major scheme for the Parish of Ditcheat, upon which work commenced in 1965, has now been completed at an estimated cost of £53,500. Included in the Council's future proposals programme are schemes for East and West Cranmore (£65,000) deferred for the present by the Authority, and extended and improved facilities for Evercreech, which will include part of Stoney Stratton (£102,370). At the survey stage are schemes for Lydford, Batcombe and Westcombe, Parbrook (mainly West Bradley Parish), Alhampton (Ditcheat Parish) and finally Binegar, which will include part of Emborough.

TAUNTON. Although no major works or improvements were carried out during the year by the Council, they have laid at a cost of £5,000, a sewer extension to Mill Lane, Trull and furthermore, have made some progress on the Henlade portion of the Ruishton sewerage scheme (£29,000). The sewerage and sewage disposal scheme for North Curry and Stoke St. Gregory, at one time put forward as separate schemes but now combined, has been under consideration for a great number of years. However, due to certain difficulties, the combined scheme is now being reconsidered. Sewerage and sewage disposal schemes for the parishes of West Monkton (£250,000) and Kingston St. Mary (£226,000) are at an advanced stage of planning and proposals are also being considered for West Bagborough.

WELLINGTON. Relaying of sewers, improvements and extensions to the disposal works at Wiveliscombe have now been completed at an estimated cost of £40,000. Progress is also well advanced on the provision of works and sewers at Bradford-on-Tone, including part of West Buckland (£80,000) also at Fitzhead, where similar facilities are to be provided (£23,500). The District Council's future proposals are designed to deal with the parishes of Sampford Arundel and Wellington Without (Holywell Lake), where a major scheme is to be provided at a cost of £100,000; the provision of new sewers at Oake (Hillfarrance) at an estimated cost of £32,000. Other future improvements include enlargement of the disposal works at Milverton; provision of new sewers at Hillcommon and Hillfarrance, both in the Parish of Oake.

WELLS. The major scheme concerning the provision of sewerage and sewage disposal facilities for Butleigh, Butleigh Wootton and Baltonsborough, has now been completed. Proposals for the future include the provision of schemes for the Parishes of Coxley (£65,000), Wookey (Wookey Hole) (£55,000), and extension of the existing works at Wookey in order to take the drainage from Yarley, Henton and Bleadney (£15,000). Although no costs have been prepared, it is proposed, at a later date, to proceed with schemes for Meare, Oxenpill and Westhay, and Chewton Mendip.

WILLITON. The new sewerage and sewage disposal scheme for the Parishes of Bicknoller, Sampford Brett, Stogumber and West Quantoxhead has now been completed. The District Council's future proposals are designed to deal with the following Parishes:- Stogursey (including Shurton and Burton) with provision for extension of new sewage disposal works at a later date, total estimated cost £42,000; Holford, Kilve and East Quantoxhead (£57,000); Timberscombe, Wootton Courtney, Bilbrook (£40,000); Leyland (£3,600); and extension at Doniford (£700).

WINCANTON. Works in connection with the provision of sewerage and sewage disposal facilities for Yenston in the Parish of Henstridge, also Sutton Montis, have now been completed at a total estimated cost of £30,000. Other small extensions have also been completed, namely at Cutty Lane, North Cadbury, Ansford and Castle Cary. With regard to future proposals in order of priority, the District Council have stated that a main scheme is to be provided for Galhampton in the Parish of North Cadbury (£43,000); provision of sewerage and sewage disposal facilities for North Cheriton and Horsington (£97,500) and finally, to relay defective sewers at Castle Cary (£4,000).

YEOVIL. Work is still proceeding in connection with the main scheme for Martock. To date the foul water sewer has been completed at an estimated cost of £10,400. Work is still proceeding on the provision of a new nitrifying filter and storm flow pumping station (£19,030). As mentioned last year, this Authority have drawn up a five-year programme and in order of priority the proposals are as follows:-

		Approximate Cost
Ash and Tintinhull	— Sewers and sewage disposal works — contract awarded	£134,000
South Petherton	— West Street storm relief sewer — contract awarded	£3,330
Marston Magna, Rimpton and West Camel	— Sewers and sewage disposal works. Awaiting the approval of the Ministry of Housing and Local Government	£154,000
South Petherton	— New sewage disposal works and relief sewers. Awaiting the approval of the Ministry of Housing and Local Government	£50,000
Chiselborough, Norton-sub-Hamdon and West Chinnock	— Sewers and sewage disposal works	£156,000
Odcombe	— Sewers and sewage disposal works	£65,000

Schemes approved under the Rural Water Supplies and Sewerage Acts, 1944 – 65 during the year were as follows:—

Rural District	Scheme	Estimated Cost (as submitted)		
		£	s.	d.
Axbridge	Banwell, Sandford, Churchill and Langford, Sewerage – Phase I	146,331	0	0
Bathavon	Peasedown St. John – Provision of sewers to serve Carlingcott and New Buildings	38,588	0	0
Bridgwater	Stawell – Sutton Mallet Sewerage and Sewage Disposal	11,500	0	0
Bridgwater	Wembdon – Provision of foul sewer, Rising Main and Submersible Pumps	29,400	0	0
Bridgwater	Nether Stowey Sewerage and Sewage Disposal ...	133,000	0	0
Frome	Trudoxhill and Witham Friary Sewerage and Sewage Disposal – Revised proposals	93,170	0	0
Langport	Fivehead Sewerage and Sewage Disposal (incorporating Phase I of Sewage Disposal Works for the Western Sewerage District) ...	92,200	0	0
Long Ashton	Cleeve, Plunder Street Sewer Extension	3,500	0	0
Long Ashton	Yeo Valley Main Drainage Scheme			
	(1) Sewers	1,729,500	0	0
	(2) Sewage Disposal Works	648,700	0	0
Taunton	Comeytrove Lane, Bishops Hull – sewer extension	3,796	0	0
Wells	Coxley Sewerage	65,500	0	0
Williton	Holford, Kilve and East Quantoxhead Sewerage ...	57,000	0	0
Yeovil	Yeovil Without – Extension of sewers at Primrose Lane and Marsh Lane and enlargement of sewage disposal works	33,442	0	0
		£3,085,627	0	0

Schemes approved prior to 1966 but costs and/or proposals revised and re-submitted:—

Rural District	Scheme	Revised cost		
		£	s.	d.
Axbridge	South Berrow Sewerage Scheme	28,160	0	0
Bridgwater	Northern Villages Group Scheme — Basonbridge Sewer Extension	13,100	0	0
Chard	Dowlish Wake Sewerage and Sewage Disposal	45,510	0	0
Frome	Faulkland Sewerage and Sewage Disposal	50,000	0	0
Taunton	West Monkton and Cheddon Fitzpaine Sewerage	288,700	0	0
Taunton	Sewerage and Sewage Disposal Scheme — Parishes of Stoke St. Gregory and North Curry	278,000	0	0
Wincanton	Henstridge, Yenston Sewerage Scheme ...	16,000	0	0
Yeovil	Ash and Tintinhull Sewerage and Sewage Disposal	133,792	0	0
		£853,262	0	0

HOUSING

A Sub-Committee was appointed in 1965 by the Central Housing Advisory Committee to "consider the practicability of specifying objective criteria for the purposes of slum clearance, rectification of disrepair and other housing powers relating to minimum tolerable standards of housing accommodation; and to make recommendations"; or, very simply, how to make old houses habitable and the problems involved. The Sub-Committee's report has now been published with the appropriate title of "Our Older Homes — a Call for Action".

So much can be done to "reclaim" older properties and every effort should be made to encourage owner/occupiers and others to take full advantage of the various grants available. The Sub-Committee have emphasized that standards must be applied i.e. environment relative to areas of improvement; furthermore that having instituted an Area Improvement Scheme, Councils should be given powers to enforce a proper degree of maintenance.

Where large areas of improvements are involved, there is the question of finance. Where are the Local Authority to obtain sufficient resources to deal with such improvements? Having regard to the Committee's findings it would seem that a further housing survey will be necessary in order to classify properties, e.g. individual properties which qualify for major improvements, houses beyond repair to be included in clearance areas, and properties which may usefully be "patched" for a limited period. Many Authorities have this information available but in the light of the Committee's findings it may well be necessary for a review to be carried out.

There are many other problems involved and the Sub-Committee have instanced cases where property owners are unable or unwilling to face the responsibility of keeping their property in good repair. In such instances they suggest that the Local Authority might be given powers enabling them to advance the necessary money and register a charge on the property repayable on sale or transfer. The Sub-Committee also propose that in cases where owners are unwilling to keep the property in good repair the Local Authority should have powers to purchase.

Many of these proposals are fraught with difficulties but for rented property the Rent Act, 1965, it is anticipated, will help to deal with this situation when controlled properties are brought within the system of rent regulation.

The Committee are also of the opinion that the present improvement grant facilities do not go far enough and that more thought should be given to improved environment. This may well mean the demolition of some buildings to benefit others — certainly an excellent suggestion if a substantial number of houses can be given a new lease of life.

Fortunately in Somerset we are not faced with the problems of a City, but nevertheless there are many urban and rural areas where the application of the principles recommended could give new life to old property. Theoretically the suggestions are sound but, during the period of reconditioning and improving, temporary accommodation may need to be found for some of the families involved.

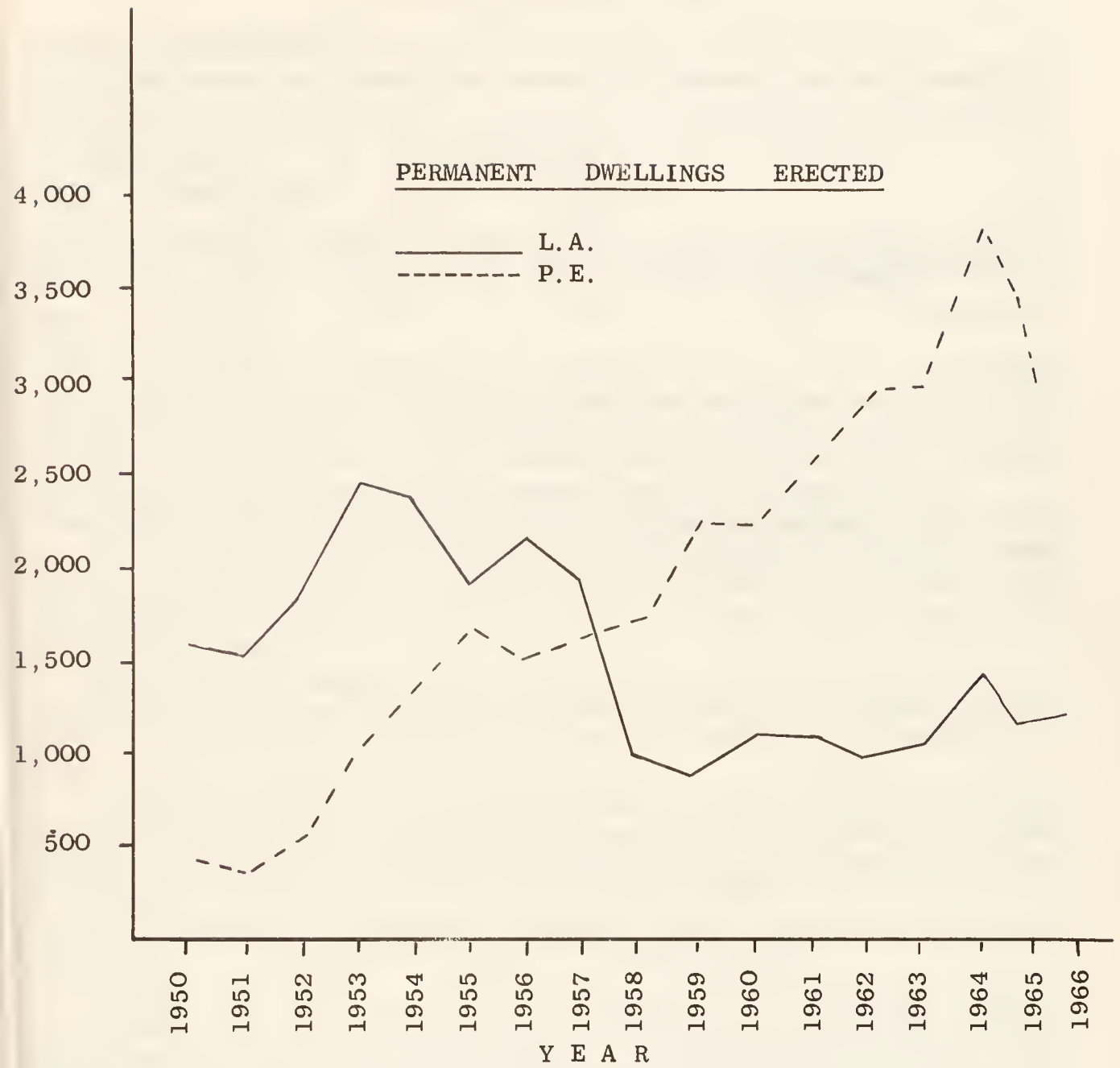
Details regarding applications received and approved during 1966 for Discretionary and Standard Grants are set out in Table 'A'. Information concerning the houses demolished, closed or declared unfit etc. during 1966 appears in Table 'B'.

TABLE 'A'

	Applications							
	Received				Approved			
	Boroughs and Urbans		Rurals		Boroughs and Urbans		Rurals	
	1965	1966	1965	1966	1965	1966	1965	1966
Discretionary	127	129	361	314	107	101	341	288
Standard	330	313	372	327	292	298	352	327
Totals	457	442	733	641	399	399	693	615

TABLE 'B'

	Action during year							Rent Act, 1957 (1st Schedule)	
	Number of houses demolished or closed under Section 42 of the Housing Act, 1957 (Clearance Areas)	Number of houses demolished or closed		Number of temporary dwellings, huts etc. demolished	Number of houses declared unfit under Section 9 of the Housing Act, 1957 (capable of repair)	Number of unfit houses occupied under licence	Number of houses made fit during year	Certificate of Disrepair	
		under Section 17 of the Housing Act, 1957 (individual unfits)	for other purposes (Road Improvements etc.)					Number of applications received	Number of Certificates issued
Boroughs & Urbans	59	135	53	60	38	—	574	2	—
Rurals	39	199	25	50	565	2	461	—	1
Totals	98	334	78	110	603	2	1,035	2	1



APPLICATIONS FOR HOUSING ACCOMMODATION

Most local authorities divide applications for housing accommodation into three categories. These are shown in the following Table together with comparative figures for 1965.

Applications	As at 31.12.65		As at 31.12.66	
	Boroughs and Urbans	Rurals	Boroughs and Urbans	Rurals
Urgent Bona Fide Cases	1,856	1,788	2,290	1,744
For Old People's Dwellings	1,368	986	1,331	976 *
Other	2,506	1,672	2,299	1,851

* Includes transfers.

Houses constructed by local authorities during 1966 numbered 1,591 (1,360 in 1965); private construction reached a figure of 3,275 (3,758 in 1965). The graph on page 63 illustrates housing progress since 1950.

SANITARY CIRCUMSTANCES

CLOSET ACCOMMODATION

Conversions from pail and other chemical closets etc. numbered approximately 300 – some 200 less than in 1965. Few major schemes of sewerage and sewage disposal were completed during the year and this decrease is therefore not surprising.

CESSPOOL EMPTYING

The procedure for emptying cesspools varies throughout the County – only nine authorities providing a service. Charges vary considerably ranging from 15s. 0d. to £3 per load. One authority undertakes to provide a free service twice per year.

SCHOOL SANITATION

Dr. Davidson, in his introduction to the Annual Report for 1945, wrote “On the environmental side alone, it must not be forgotten that the hygienic standards of many schools in Somerset are little short of deplorable. Much is promised under the new Act; it is hoped that there will be no delay in securing adequate and basic hygienic standards for all these children. It is work which requires to be done very urgently”.

For a few years thereafter lack of labour and materials limited sanitary improvement work to that of an essential and urgent nature, with priority being given to those schools scheduled to function for a number of years. A change in school status created further difficulties and this was rapidly followed by a serious economic situation which again hindered progress.

Early in 1950 a sanitary survey was carried out on all schools in Somerset. This revealed how serious was the situation, and over the last 16 years varying sums have been made available for the conversion of lavatory accommodation and for other improvements.

From the foregoing it will be seen that, although progress has been made, it has been comparatively slow. As mentioned in the Report last year, Somerset has a greater proportion of pre-20th Century schools than the country as a whole (about 75% of primary schoolchildren are in schools built in the last century or earlier).

It was therefore very gratifying to learn that a “crash” programme is to be carried out over a period of three years at an approximate cost of £364,000.

The sanitary improvement programme is designed to deal with the under-mentioned seven points. Initially only pre-war primary schools are to be dealt with. Secondary schools are not, at this stage, being considered as approximately three-quarters of them were built in the post-war or the immediate pre-war period and therefore have reasonably satisfactory sanitary conditions. As to the remainder, it is felt that these are likely to be replaced or improved at a later date.

The seven points are:

- (a) Lavatory blocks are to be enclosed as protection against the weather and to prevent freezing, including the provision of some form of heating;
- (b) The general standard of all fittings is to be made satisfactory;
- (c) Any serious defects in the number of sanitary fittings is to be made good;
- (d) Hot water supply is to be provided;
- (e) The provision of separate lavatory accommodation for staff is to be made;
- (f) Provision of washing facilities for School Meals staff is to be made in, or conveniently near, the kitchen or scullery;

- (g) Some provision is to be made for artificial lighting for the convenience of the cleaner in the winter and when schools are used in the evenings.

HOUSE REFUSE

	Removed by		Number of Vehicles Employed
	Direct Labour	Contract	
Boroughs and Urbans	20	—	45
Rurals	14	2	43

The methods of removal remain the same as in 1965, but it would seem that more vehicles are now employed on collection.

TRADE WASTE

The majority of borough and urban authorities operate a scheme for the removal of trade refuse. Whilst some authorities provide a special service, others combine the collections with the removal of normal domestic refuse.

REFUSE DISPOSAL

	Boroughs and Urbans	Rurals
Controlled tipping	18*	18 ^x
Semi-controlled tipping	1	6
Uncontrolled tips	1	—
Incineration method	3	1

* Includes one tip outside administrative County Boundary — Bathavon R.D.C. has authority to use Bath Corporation Tip.

^x Bridgwater R.D.C. permit Burnham-on-Sea Urban District Council the use of their tip at Puriton. The Urban District Council tip is now out of use except for minor emergencies.

More authorities are drawing attention to the lack of suitable land for the disposal of refuse but as mentioned last year machinery is now available which is capable of pulverising and composting refuse. Although expensive to install, it would reduce the work of pest control and ensure that the refuse was disposed of without causing any nuisance. One authority is now negotiating the purchase of such plant.

PREVENTION OF DAMAGE BY PESTS

The control of pests has been carried out very successfully during the year and no major problems have arisen. There are sixteen whole-time rodent operators employed, whilst the remaining twenty authorities share the services of an operator on a part-time basis or have a contract with a rodent control company.

CAMPING AND CARAVAN SITES

GYPSIES

Although a survey of gypsy and other similar caravan dwellers was carried out in 1965 with a view to assessing the need for sites, little progress in the provision of land facilities has been made. There is a tendency for everyone to think that the neighbouring parish is more suitable for gypsies than their own; consequently progress in the provision of sites is not easy.

Fortunately in Somerset the gypsy problem is not very serious, although the availability of sites might encourage many itinerants to lead a more settled way of life.

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

	Permanent		Seasonal	
	Boroughs & Urbans	Rurals	Boroughs & Urbans	Rurals
Number of single caravans licensed	23	333	—	18
Number of site licences issued in respect of more than one caravan	19	75	25	93
Estimated maximum number of occupants resident during year	1,103	3,264	17,341	15,068
Number of sites closed as a result of above Act	2	—	—	—
Number of unlicensed sites in use	5	55	—	—

The standards of holiday and residential sites continue to improve and the amenities provided at many of them are well in excess of those laid down in the Caravan Sites and Control of Development Act, 1960.

TOURING CARAVAN SITES

Caravan Sites for touring caravans present something of a problem during the holiday season, and the efforts of the Caravan Club in this direction are worthy of note.

In conjunction with the Dulverton Rural District Council a most attractive Club site has been provided at the rear of Exmoor House, Dulverton, which is particularly well maintained by a resident warden.

On the A.38 at Cadeside just outside Wellington another Club site has been opened and this also is attractively laid out with amenities available for touring caravans and also for the tourist traffic on this busy trunk route.

LAY-BYS — SANITARY CONVENIENCES

As part of the Ministry of Transport's pilot scheme for the provision of sanitary conveniences on trunk roads, considerable progress has been made during the year in the County and there are now five conveniences sited at intervals in the length of the A.38 between Bristol and Wellington. Their location is as follows:-

Axbridge Rural District

Biddisham

Wrington (Bottom of Redhill)

Bridgwater Rural District

Beggars Brook, North Petherton

Long Ashton Rural District

Colliters Brook, Dundry

Wellington Rural District

Chelston, West Buckland

The cost has been shared equally between the Ministry of Transport, County Council and District Council and the maintenance is a District Council responsibility.

These facilities have proved to be of inestimable value to the travelling public, and whilst it is difficult to estimate their actual usage, figures of up to 3,000 per day appear to be quite probable during the peak holiday season. This is adequate proof, if any were needed, of the necessity for such provisions.

On the whole there has been very little trouble so far as vandalism is concerned, which is normally one of the greatest problems with this type of equipment. Possibly the reason for this is that they are well illuminated at night and in full view of all road users.

SCHOOL SWIMMING POOLS

The Somerset County Education Committee has continued to grant-aid the provision of learner type swimming pools at schools. The number of pools increased from 63 to 79 during the year, most new pools being provided in primary schools.

There is a general demand for a better standard of facility, as a result of which many of the older pools are being improved. Considerable emphasis has been placed on the housing of pools in order that a longer period of use can be attained. Three pools have been provided with solar covers which permit swimming in reasonable conditions for 30 — 32 weeks each year. In addition one pool was constructed in disused central kitchen premises, to serve a primary school, and was provided with full heating apparatus.

Office records show that unheated open-air pools will only provide reasonable swimming conditions over a very short period each year. In some years as little as six weeks' use is attained. Even though water conditions may be satisfactory, cold winds or rain can mar things equally for Instructor and bather.

At the beginning of the year the County Health Inspector's Section, in conjunction with officers of the County Education Department, ran a one-day Course on swimming pool use and maintenance for the benefit of teachers and school caretakers. This proved a great success, was well attended, and the knowledge gained by those participating has helped to reduce the burden of queries arising over purification plant maintenance and general swimming pool operation.

In order to obtain the fullest use possible from school pools, encouragement is now given to schools in one locality to combine their efforts on the provision of a pool to be used jointly. Where a pool already exists at a school in the locality others are

encouraged to make use of this facility by arrangement with the Head of the school where the pool is situated and this often requires the installation of more efficient purification plant to the benefit of all concerned. This method of co-operation is to be encouraged as it stabilizes problems of supervision and maintenance from the officers' point of view and also results in a better facility generally.

The development of school swimming pools over the past few years is given in the following table:

Year	PERMANENT POOLS		PORTABLE POOLS	
	With Purification Plant	Without Purification Plant	With Purification Plant	Without Purification Plant
Prior to 1960	2	13	—	—
1960	4	16	—	—
1961	7	19	—	2
1962	9	21	1	2
1963	13	20	1	3
1964	25	15	2	9
1965	29	15	9	10
1966 (Sept.)	40	12	17	10

NOTE: A further 7 pools are either under construction or at drawing board stage.

	Number of Baths		Samples Taken	
	Local Authority	S. C. C. Schools	Bacteriological	
			Satisfactory	Unsatisfactory
Boroughs and Urbans	15	33	) ) 150)	12
Rurals	—	46		

SUPERVISION OVER THE FOOD SUPPLY

SLAUGHTERHOUSES AND MEAT INSPECTION

The Meat Inspection (Amendment) Regulations, 1966, came into operation on 30th September, 1966. These Regulations are designed to provide further measures necessary to bring about the full inspection of all home-killed meat before leaving the slaughterhouse. Four main provisions are incorporated in the amending regulations:-

- (a) local authorities are empowered, subject to certain rights of appeal by occupiers or users of private slaughterhouses, to fix times at which slaughtering may take place in private slaughterhouses;
- (b) the present provisions enabling any meat to be removed from a slaughterhouse if it had not been inspected within a specified period of slaughter, are terminated with effect from 31st October, 1966 (one month after provisions a, c and i).
- (c) green ink is prohibited for use in conjunction with inspection marking stamps;
- (d) certain detail in the procedure of inspection laid down in the principal regulations has been amended.

On the subject of 'meat inspection charges' it is not proposed to change the existing rates, although the Minister still retains the right to vary these should he consider them unreasonable.

With regard to hours of slaughtering at private slaughterhouses, authorities are provided, for the first time, with power to exercise control over the hours of slaughter. This of course is not mandatory and it is for the local authority to consult with the occupiers and users of private slaughterhouses before exercising their powers.

THE SLAUGHTERHOUSES (HYGIENE) (AMENDMENT) REGULATIONS, 1966

Very briefly, these Regulations, which come into operation on 1st February, 1967, prohibits any person to permit the retention in a slaughterhouse of any carcass of an animal slaughtered elsewhere unless specified conditions are complied with (this is an extension of Regulations 19(2), 19(3) and 20 of the principal Regulations). Furthermore, unless an authorised officer gives his consent, no animals intended for slaughter may be retained in a slaughterhouse for more than 72 hours. These Regulations also prohibit the use of wiping cloths after 1st November, 1968, in the dressing of carcasses. Up to this date, cloths may continue to be used, subject to sterilisation after each application. It is now obligatory for the occupier of a slaughterhouse to maintain cleanliness of the lairage.

TABLE 'A'

	Slaughterhouses/Abattoirs in operation owned or leased by Local Authorities	Private Slaughterhouses		Bacon Factories	Knackers Yards
		Licensed	Operating		
Boroughs & Urbans	3	16	15	2	1
Rurals	—	52	49	1	6
Totals	3	68	64	3	7

TABLE 'B'

	Cattle and Cows	Calves	Sheep and Lambs	Pigs	Total
(1) Number inspected	74,195	45,283	245,162	216,204	580,800
(2) All diseases except tubercu- losis and Cysticerci					
(a) Whole carcasses condemned	634	925	1,617	1,133	4,309
(b) Carcasses of which some part or organ was con- demned	29,118	1,540	25,264	34,737	90,659
(3) Tuberculosis only					
(a) Whole Carcasses condemned	2	—	—	3	5
(b) Carcasses of which some part or organ was con- demned	131	1	—	2,706	2,838
(4) Cysticercosis					
(a) Carcasses of which some part or organ was condemned	290	—	32	—	322
(b) Carcasses submitted to treatment by refrigeration	176	—	—	—	176
(c) Generalised and/or totally condemned	—	—	—	—	—

NOTE: HORSES 1,195 killed; 1,195 inspected

No. 2(a) above: whole carcasses condemned — 10

No. 2(b) above: part of carcasses condemned — 188

The total weight of meat condemned during the year amounted to 848,581 lbs. of which 20,287 lbs. or 2.4 per cent was affected with tuberculosis. This is not a complete figure for the County as some authorities were unable to provide this information.

TABLE 'C'

	Meat Condemned — 1966 — lbs. —					
	Cattle and Cows	Calves	Sheep and Lambs	Pigs	Horses	Total
Tuberculosis	1,533	10	—	18,744	—	20,287
Cysticercosis	6,463	—	27	—	—	6,490
Other	215,329	371,344	65,500	163,624	6,006	821,804
Totals	223,325	371,354	65,527	182,368	6,006	848,581

POULTRY PACKING ESTABLISHMENTS

There are now 16 such establishments in Somerset. At present there are no regular examinations carried out, although Public Health Inspectors will inspect carcasses during routine visits or by request. The average weekly kill is estimated at well over 112,630 birds, an increase over 1965 of 14,630.

Some six years ago a "Code of Practice on Poultry Dressing and Packing" was published. It has, however, become apparent that the level of inspections of broiler poultry and premises varies. In view of this, the Ministry of Health has drawn attention to the need for frequent and regular visits, not only to ensure that the Food Hygiene Regulations are being observed, but also to see that the recommendations contained in the "Code of Practice" are being followed.

DESIGNATED MILK (RAW)

MILK PRODUCERS AND PRODUCER-RETAILERS. The following details have been provided by the Divisional Executive Officer of the County Agricultural Executive Committee.

	As at 31st December, 1966
Number of Registered Producers in County	5,120
Number of Producers holding Untreated milk licences	236

MILK (SPECIAL DESIGNATION) REGULATIONS, 1963 (as amended)

Details of samples taken from the licensed pasteurising and one sterilising plants during 1966 are set out in Table 'A'.

As mentioned earlier in this Report, two large dairies have installed water reclamation plant. Processing dairies use large quantities of water, not only for cleaning down premises generally, but also associated with cooling of milk and washing of bottles and churns, etc. In common with other industries measures have to be taken to conserve water for not only is it becoming more costly to purchase, but is now a matter of national importance. The pilot plant to reclaim water discharging from the bottle-washing machine installed at one of the dairies proved successful and the owners of the second dairy, having satisfied themselves as to the efficiency of the unit, decided to install a unit to the same basic design. At the dairy where the pilot plant was installed it is possible to re-use the water for a period of two weeks with complete safety and well within the limits and standards set by the World Health Organisation and other Authoritative Bodies on standards of potable waters. It has been found that in addition to general savings on water, there is considerable saving in boiler capacity and the production of a more sterile bottle. At the second dairy, due to much heavier loadings on plant, it has been found that this water is re-usable over a period of seven or eight days. The total saving on water amounts to an estimated 8,400,000 gallons per annum.

TABLE 'A'

Licensed Pasteurising Plant Samples

	Number of Samples taken	Number Satisfactory	Percentage Unsatisfactory
Pasteurised			
Bulk	26	26	—
Bottled	467	462	1.1
	493	488	1.0
Sterilised	25	25	—

FAILURE TABLE

	Pasteurised Milk
(1) Number failing Phosphatase test	—
(2) Number failing Methylene Blue test	5
(3) Number failing both tests (1) and (2)	—

Information concerning samples taken from Producer/Retailers and licensed Dealers appearing in Table 'B', and Table 'C' is a summary of all samples taken, excluding school milk, during 1966. School milk results appear on page 76.

TABLE 'B'

Licensed Dealers' Samples

	Numbers of Samples taken	Number Satisfactory	Percentage Unsatisfactory
Pasteurised	1,538	1,474	4.2
Sterilised	52	52	—
Untreated	1,327	1,124	15.3
	2,917	2,650	9.1

FAILURE TABLE

	Pasteurised Milk	Untreated Milk
(1) Number failing Phosphatase test	—	—
(2) Number failing Methylene Blue test	63	203
(3) Number failing both tests (1) and (2)	1	—

TABLE 'C'
Licensed Pasteurising Plants and Dealers' Samples
(Tables 'A' and 'B')

	Number of Samples taken	Number Satisfactory	Percentage Unsatisfactory
Pasteurised	2,031	1,962	3.4
Sterilised	77	77	—
Untreated	1,327	1,124	15.3
	3,435	3,163	7.9

FAILURE TABLE

	Sterilised Milk	Pasteurised Milk	Untreated Milk
(1) Number failing Phosphatase test		—	—
(2) Number failing Methylene Blue test	No	68	203
(3) Number failing both tests (1) and (2)	failures	1	—

Dealers licences operative as at 31st December, 1966 are as follows:-

Dealer's (Steriliser's) Licence	1
Dealer's (Pasteuriser's) Licence	15
Dealer's (Untreated) Licence	44
Dealer's (Pre-packed Milk) Licence	607

In addition to the above, there are a further 236 producers of untreated milk licensed by the Ministry of Agriculture, Fisheries and Food to retail. 37 of these are also licensed by the County Council as Dealers.

Samples taken from these Producer/Retailers are included in the figures in table 'B' above.

BIOLOGICAL SAMPLING

1,392 samples were examined by the Public Health Laboratory for Brucella of which 33 were found to show evidence of infectious Brucellosis.

Circular No. 17/66 published by the Ministry of Health in October, deals with the procedure to be adopted when suspicions are aroused about the safety of any milk for human consumption. The procedure suggested has been observed by the Department and only minor adjustments were necessary to fully comply with the Circular. All positive cases are referred to the District Medical Officer who, if he considers it necessary, will serve a Heat Treatment Notice on the farmer in accordance with Regulation 20 of the Milk and Dairies (General) Regulations of 1959. Such Notices remain in force until the Medical Officer is satisfied that the milk is safe for human consumption. (The number of calves vaccinated against bovine contagious abortion under the Free Calf Vaccination Scheme totalled 34,857.)

MILK SAMPLING — ANTIBIOTICS

Samples submitted to the County Analyst numbered 511 during the year, of which 4 gave readings indicating the presence of penicillin. Sampling and testing of in-farm milk for penicillin or other inhibitory substances was first introduced to Somerset in 1963 and the results have proved that there is not always strict compliance with the instructions covering the use of antibiotics in the treatment of mastitis. It is not generally appreciated that penicillin in milk at a level of about 0.05 I.U. per ml. can have effects on certain people who may be, or possibly become, particularly sensitive to antibiotics.

ANIMAL HEALTH

The following details have been obtained from the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food.

						As at 31.12.66
(1)	Approximate number of Attested Cattle in County	...	...			393,900
(2)	Number of herds Attested	...	...	...	...	5,072
(3)	Number of mixed herds (beef or dairy cross bred)	...	...			1,294
(4)	Number of herds (beef)	...	...	...	...	923

HOSPITAL FARMS

Samples taken on behalf of the Ministry of Health for bacteriological examination from the one remaining hospital farm in the County numbered 23.

MILK-IN-SCHOOLS SCHEME

Details of milk samples taken from schools and other establishments during 1966 are set out in the following Table:-

BACTERIOLOGICAL SAMPLES OF MILK SUPPLIES TO SCHOOLS AND OTHER COUNTY COUNCIL ESTABLISHMENTS IN 1966

	Pasteurised		Untreated		Total
	Sat.	Uns.	Sat.	Uns.	
Schools	409	19	5	—	433
School Kitchens	50	5	—	—	55
Self-Contained Canteens ...	151	14	3	—	168
Residential Nurseries, Day Nurseries and Children's Homes	55	6	26	1	88
Mental Health Training Centres	15	—	—	—	15
County Council Homes and Institutions	52	15	18	1	86
TOTALS	732	59	52	2	845

ICE-CREAM

Details of samples collected by Local Authorities during 1966.

SAMPLES TAKEN

	Boroughs & Urbans		Rurals		Total	
	Number	% Sat.	Number	% Sat.	Number	% Sat.
Hot Mix	219	88.6	96	95.8	315	90.8
Cold Mix	26	92.7	0	—	26	92.7
TOTALS	245	89.0	96	95.8	341	90.9

SCHOOL MEALS SERVICE

Meat Inspections at Canteens and Kitchens were maintained throughout the year. All complaints were investigated but generally the quality of meat supplied under contract was of a high standard.

SMOKE ACT, 1965

Portishead U.D.C. is the only authority really troubled with smoke problems. Complaints were again received regarding fumes from the phosphorous factory in the Dock area and investigations have revealed that teething troubles with the new furnaces were primarily responsible for the fume emission.

A second smoke and sulphur dioxide (SO₂) apparatus has now been installed by the Council in one of the new blocks of flats at West Hill. The results of the two stations followed a similar pattern with variations for the pollution levels both of SO₂ and smoke being consistent with the wind direction at any particular time. The West Hill Station in particular gave an indication of the effect of smoke pollution from domestic chimneys as this was higher during the colder weather.

TABLE 1 CAUSES OF, AND AGES AT, DEATH DURING THE YEAR 1966

Causes of Death	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District											
	All Ages	Under 4 weeks	4 weeks and under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 35 years	35 and under 45 years	45 and under 55 years	55 and under 65 years	65 and under 75 years	75 and upwards
Tuberculosis, respiratory ...	16	—	—	—	—	—	1	1	5	3	3	3
Tuberculosis, other ...	3	—	—	—	—	—	1	—	1	1	—	—
Syphilitic disease ...	5	—	—	—	—	—	—	—	—	—	3	2
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections ...	1	—	—	1	—	—	—	—	—	—	—	—
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	1	—	1	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ...	13	—	1	1	—	—	—	—	5	2	2	2
Malignant neoplasm, stomach	162	—	—	—	—	—	—	1	11	26	60	64
Malignant neoplasm, lung, bronchus	271	—	—	—	—	—	—	3	29	81	118	40
Malignant neoplasm, breast ...	125	—	—	—	—	—	4	6	18	20	34	43
Malignant neoplasm, uterus ...	55	—	—	—	—	—	1	4	7	16	16	11
Other malignant and lymphatic neoplasms ...	626	—	—	2	3	6	8	16	41	126	204	220
Leukaemia, aleukaemia ...	40	—	—	1	2	2	2	4	5	5	7	12
Diabetes ...	46	—	—	—	—	—	1	1	2	5	21	16
Vascular lesions of nervous system	1,166	—	—	—	1	—	1	13	23	113	298	717
Coronary disease, angina ...	1,402	—	—	—	—	—	4	17	84	232	449	616
Hypertension with heart disease	87	—	—	—	—	—	—	1	1	12	26	47
Other heart disease ...	833	—	1	—	1	2	6	8	14	36	129	636
Other circulatory disease ...	413	—	—	—	—	—	2	4	10	38	95	264
Influenza ...	63	—	1	—	1	2	—	3	1	7	12	36
Pneumonia ...	425	2	16	1	1	—	2	2	10	35	72	284
Bronchitis ...	277	—	4	2	1	—	1	3	3	40	89	134
Other disease of respiratory system	86	—	2	—	—	—	1	2	2	12	29	38
Ulcer of stomach and duodenum	34	—	—	—	—	—	—	3	—	4	11	16
Gastritis, enteritis and diarrhoea	33	—	—	1	—	1	—	—	1	4	10	16
Nephritis and nephrosis ...	37	—	—	—	—	1	1	3	7	8	5	12
Hyperplasia of prostate ...	27	—	—	—	—	—	—	—	—	—	6	21
Pregnancy, Childbirth and abortion	1	—	—	—	—	—	1	—	—	—	—	—
Congenital malformations ...	41	25	5	3	1	1	1	2	1	2	—	—
Other defined and ill-defined diseases ...	471	71	6	2	4	7	3	11	15	43	94	215
Motor vehicle accidents ...	93	—	—	1	7	21	7	9	13	14	9	12
All other accidents ...	117	1	3	4	3	10	4	4	12	16	15	45
Suicide ...	54	—	—	—	—	4	1	9	11	15	12	2
Homicide and operations of war	5	—	—	3	—	—	—	—	—	—	2	—
All Causes ...	7,029	99	40	22	25	57	53	130	332	916	1,831	3,524

TABLE 2 CAUSES OF DEATH AT ALL AGES IN EACH DISTRICT DURING THE YEAR 1966
URBAN DISTRICTS

Causes of Death	Bridgwater	Bumham	Chard	Clevedon	Crewkerne	Frome	Glastonbury	Ilminster	Keynsham	Minehead	Norton-Radstock	Portishead	Shepton Mallet	Street	Taunton	Watchet	Wellington	Wells	Weston-super-Mare	Yeovil	TOTAL (Urban Districts)
Tuberculosis, respiratory	3	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	2	3	10
Tuberculosis, other ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	2
Syphilitic disease ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	4
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	2	1	5
Malignant neoplasm, stomach ...	5	5	3	2	5	2	1	3	5	—	1	1	1	1	9	3	1	2	20	4	74
Malignant neoplasm, lung, bronchus ...	12	7	3	8	2	7	—	—	7	3	6	2	6	2	18	2	4	1	30	10	130
Malignant neoplasm, breast ...	6	7	1	5	—	2	—	—	4	6	3	3	4	3	6	—	2	1	17	7	77
Malignant neoplasm, uterus ...	1	3	—	2	—	1	—	—	1	—	1	—	1	1	1	—	2	1	7	3	25
Other malignant and lymphatic neoplasms	30	15	5	15	6	11	6	1	22	9	21	13	9	5	45	4	10	10	72	32	341
Leukaemia, aleukaemia	—	2	—	1	1	3	1	—	3	—	2	1	—	—	1	—	2	1	5	4	27
Diabetes ...	1	1	1	2	—	—	—	—	—	1	2	—	1	—	2	—	2	2	6	2	23
Vascular lesions of nervous system ...	41	28	24	53	9	37	8	6	30	34	19	18	10	14	53	8	19	37	148	70	666
Coronary disease, angina	55	41	17	62	7	29	10	7	42	25	31	17	5	21	86	3	28	18	177	62	743
Hypertension with heart disease ...	3	2	4	3	—	3	—	—	1	1	1	4	—	—	7	—	—	3	13	2	47
Other heart disease ...	42	19	8	19	4	20	10	6	17	28	10	2	9	7	41	2	14	14	96	29	397
Other circulatory disease	21	23	4	17	6	7	3	2	8	12	6	3	1	6	34	4	5	1	36	18	217
Influenza ...	3	2	1	9	—	2	1	—	—	1	1	—	1	5	3	—	—	2	4	4	39
Pneumonia ...	28	6	3	7	2	18	3	2	6	10	12	3	3	5	42	2	19	4	29	16	220
Bronchitis ...	17	6	4	6	4	1	3	1	10	6	8	5	2	3	20	1	3	4	28	10	142
Other disease of respi- ratory system ...	3	4	—	2	—	1	1	—	1	1	5	2	2	—	2	—	—	—	12	—	36
Ulcer of stomach and duodenum ...	—	1	1	2	—	—	1	—	—	1	—	—	—	—	1	—	—	—	4	3	14
Gastritis, enteritis and diarrhoea ...	—	—	—	3	1	1	1	—	—	—	—	—	1	—	5	—	1	—	3	2	18
Nephritis and nephrosis	—	—	—	—	—	—	1	1	4	—	1	1	—	—	2	2	1	—	3	3	19
Hyperplasia of prostate	1	1	—	—	—	1	—	—	—	1	1	—	—	1	1	—	—	1	2	2	12
Pregnancy, Childbirth and abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Congenital malformation	—	2	1	1	—	—	—	—	—	—	2	1	—	—	4	1	1	—	5	4	22
Other defined and ill- defined diseases ...	21	8	15	10	3	9	2	5	13	11	15	3	10	5	17	3	7	24	47	18	246
Motor vehicle accidents	9	3	—	—	2	1	1	—	2	—	2	—	—	1	4	1	3	3	9	3	44
All other accidents ...	2	3	1	2	1	8	2	1	4	3	5	1	1	1	8	1	3	5	15	1	68
Suicide ...	1	1	—	2	1	2	—	—	1	2	3	—	1	2	5	1	3	1	6	4	36
Homicide and operations of war ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	1	—	1	—	4
All Causes ...	306	192	96	233	54	166	55	36	181	155	158	82	68	83	419	38	132	135	802	319	3,710

TABLE 3 CAUSES OF DEATH AT ALL AGES IN EACH DISTRICT DURING THE YEAR 1966
RURAL DISTRICTS

Causes of Death	Axbridge	Bathavon	Bridgwater	Chard	Clutton	Dulverton	Frome	Langport	Long Ashton	Shepton Mallet	Taunton	Wellington	Wells	Williton	Wincanton	Yeovil	TOTAL (Rural Districts)
Tuberculosis, respiratory ...	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	6
Tuberculosis, other ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Syphilitic disease ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Diphtheria ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Whooping Cough ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Meningococcal infections ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute Poliomyelitis ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Measles ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other infective and parasitic diseases ...	2	—	—	—	1	—	—	1	1	—	—	1	—	—	—	2	8
Malignant neoplasm, stomach	6	8	8	9	9	1	2	1	13	2	6	1	5	2	7	8	88
Malignant neoplasm, lung, bronchus ...	19	16	8	5	15	4	5	3	17	2	14	5	2	4	10	12	141
Malignant neoplasm, breast	1	3	6	2	2	1	1	1	2	1	7	4	1	2	6	8	48
Malignant neoplasm, uterus	3	—	3	—	—	—	—	2	5	1	1	1	2	2	5	5	30
Other malignant and lymphatic neoplasms ...	33	11	19	23	22	1	9	22	35	8	20	13	8	13	24	24	285
Leukemia, aleukaemia ...	—	—	3	1	1	—	1	—	1	1	2	—	—	1	1	1	13
Diabetes ...	3	1	1	1	6	—	1	1	1	—	2	—	1	1	1	3	23
Vascular lesions of nervous system ...	65	38	31	35	41	9	11	13	54	12	41	13	26	35	39	37	500
Coronary disease, angina ...	90	54	53	31	44	6	23	25	78	16	60	20	28	37	39	55	659
Hypertension with heart disease ...	2	—	4	3	3	—	3	3	5	1	4	1	5	3	—	3	40
Other heart disease ...	48	27	28	14	21	2	18	24	38	16	59	14	34	21	28	44	436
Other circulatory disease ...	14	6	29	10	11	3	4	10	23	9	18	6	7	10	16	20	196
Influenza ...	4	2	1	—	2	—	1	1	—	—	2	—	4	5	1	1	24
Pneumonia ...	21	14	16	5	9	6	2	14	17	3	17	8	28	13	12	20	205
Bronchitis ...	21	13	7	8	11	1	2	7	10	1	7	5	9	12	12	9	135
Other disease of respiratory system ...	7	4	1	—	6	1	3	3	8	3	6	—	1	3	2	2	50
Ulcer of stomach and duodenum ...	4	—	1	—	—	—	1	2	1	1	3	1	—	3	2	1	20
Gastritis, enteritis and diarrhoea ...	1	—	1	1	—	—	—	1	—	1	2	1	2	—	2	3	15
Nephritis and nephrosis ...	2	1	1	—	1	—	—	2	3	—	2	—	1	1	—	4	18
Hyperplasia of prostate ...	7	—	2	—	—	—	—	—	—	1	1	—	1	1	1	1	15
Pregnancy, Childbirth and abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital malformation ...	2	—	1	—	3	—	2	1	2	1	2	—	—	2	1	2	19
Other defined and ill-defined diseases ...	22	10	11	18	14	3	6	14	26	8	22	10	18	8	17	18	225
Motor vehicle accidents ...	9	4	4	2	2	—	—	1	6	4	3	—	1	3	7	3	49
All other accidents ...	5	5	2	1	5	—	—	3	4	1	5	1	4	8	3	2	49
Suicide ...	5	1	—	1	1	2	1	—	2	1	3	—	—	—	1	—	18
Homicide and operations of war ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
All Causes ...	398	221	242	171	230	40	96	155	352	94	310	105	188	190	238	289	3,319

TABLE 4

TABLE SHOWING, FOR EACH URBAN DISTRICT, THE NUMBER OF BIRTHS, AND DEATHS, THE NUMBER OF DEATHS OF INFANTS, ALSO THE BIRTH RATE, DEATH RATE, AND RATE OF INFANTILE MORTALITY

Urban Districts	Live Births	Still Births	Deaths	Deaths under 1 year	Population	Crude Birth Rate	Adjusted Birth Rate	Crude Death Rate	Adjusted Death Rate	Infantile Mortality Rate
Bridgwater ...	494	8	306	8	26,500	18.64	18.27	11.54	10.63	16.19
Burnham ...	174	2	192	5	10,980	15.84	19.01	17.49	11.90	28.73
Chard ...	108	1	96	3	6,690	16.14	18.08	14.35	10.33	27.78
Clevedon ...	198	2	233	1	12,530	15.81	18.80	18.60	10.23	5.55
Crewkerne ...	60	1	54	1	4,550	13.19	15.96	11.87	10.80	16.67
Frome ...	216	4	166	4	11,980	18.03	19.65	13.86	9.56	18.51
Glastonbury ...	104	1	55	1	6,170	16.86	18.37	8.92	8.82	9.61
Ilminster ...	35	—	36	—	2,810	12.46	12.21	12.81	12.43	00.00
Keynsham ...	255	7	181	3	16,820	15.16	14.86	10.76	11.41	11.75
Minehead ...	91	1	155	2	7,400	12.29	16.60	20.94	10.06	21.97
Norton-Radstock	281	6	158	7	13,940	20.16	20.76	11.33	11.79	24.91
Portishead ...	155	1	82	2	7,370	21.03	23.13	11.13	12.46	12.90
Shepton Mallet	86	2	68	—	5,500	15.63	16.42	10.76	10.14	00.00
Street ...	143	4	83	1	7,440	19.22	18.64	11.15	12.05	6.99
Taunton ...	592	7	419	8	37,120	15.95	16.27	11.29	10.39	13.51
Watchet ...	40	1	38	2	2,600	15.38	17.69	14.62	13.15	50.00
Wellington ...	107	1	132	2	8,000	13.38	15.25	16.50	11.39	18.69
Wells ...	144	1	135	4	7,520	19.15	20.30	17.95	10.77	27.70
Weston-super-Mare	667	7	802	16	43,910	15.19	18.07	18.27	12.24	23.98
Yeovil ...	404	9	319	9	25,300	15.97	16.92	12.61	11.22	22.25
TOTAL of Urban Districts	4,354	66	3,710	79	265,130	16.43	17.74	14.00	11.06	18.12

TABLE 5

TABLE SHOWING, FOR EACH RURAL DISTRICT, THE NUMBER OF BIRTHS, AND DEATHS, THE NUMBER OF DEATHS OF INFANTS, ALSO THE BIRTH RATE, DEATH RATE, AND RATE OF INFANTILE MORTALITY

Rural Districts	Live Births	Still Births	Deaths	Deaths under 1 year	Population	Crude Birth Rate	Adjusted Birth Rate	Crude Death Rate	Adjusted Death Rate	Infantile Mortality Rate
Axbridge ...	535	13	398	7	34,740	15.40	18.48	11.46	9.74	13.84
Bathavon ...	328	7	221	2	21,410	15.32	16.24	10.32	8.88	6.97
Bridgwater ...	451	7	242	1	24,590	18.34	19.26	9.84	9.64	2.21
Chard ...	197	2	171	5	12,540	15.71	19.17	13.63	11.59	25.38
Clutton ...	321	6	230	5	18,880	17.00	18.36	12.18	11.09	15.57
Dulverton ...	51	1	40	—	4,120	21.38	15.35	9.71	8.74	00.00
Frome ...	219	4	96	5	11,480	19.07	21.55	8.36	8.19	22.83
Langport ...	248	—	155	2	13,760	18.03	20.55	11.27	9.91	8.06
Long Ashton ...	696	7	352	9	35,060	19.86	18.86	10.04	9.84	12.93
Shepton Mallet	184	4	94	3	10,650	17.28	19.01	8.83	8.21	16.30
Taunton ...	371	—	310	5	24,730	15.01	16.50	12.54	8.78	13.47
Wellington ...	115	2	105	—	8,390	13.71	15.63	12.51	9.76	00.00
Wells ...	156	—	188	4	10,980	14.21	14.91	17.12	8.73	25.64
Williton ...	212	1	190	3	13,500	15.70	20.26	14.08	10.28	14.15
Wincanton ...	256	7	238	3	16,830	15.21	17.79	14.15	10.47	11.71
Yeovil ...	500	3	289	6	28,900	17.30	16.44	10.00	10.80	12.00
TOTAL of Rural Districts	4,840	64	3,319	60	290,560	16.65	18.16	11.42	9.71	12.39
Administrative County	9,194	130	7,029	139	555,690	16.55	17.86	12.65	10.37	15.11
England and Wales 1966						17.70		11.70		19.00

TABLE 6

NOTIFICATION OF INFECTIOUS DISEASES

	Measles	Scarlet Fever	Puerperal Pyrexia	Meningococcal Infection	Dysentery	Whooping Cough	Pneumonia	Poliomyelitis	Erysipelas	Food Poisoning	Tuberculosis - Pulmonary	Tuberculosis - Non-Pulmonary	Typhoid Fever	Enteric and Paratyphoid Fever	Acute Encephalitis	Anthrax	Chicken Pox	Ophthalmia Neonatorum	Diphtheria
URBAN DISTRICTS																			
Bridgwater	143	3	7	-	3	1	-	-	-	1	3	3	-	-	-	-	-	1	-
Burnham	103	3	2	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-
Card	25	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-
Cleevedon	275	10	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-
Crewkerne	30	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-
Cromie	84	4	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-
Crestonbury	9	-	2	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-
Exminster	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exynsham	105	-	2	-	-	3	1	-	-	5	1	1	-	-	-	-	-	-	-
Exnehead	34	-	-	-	1	-	-	-	2	-	1	-	-	-	-	-	-	-	-
Exorton-Radstock	103	1	-	-	-	2	1	-	-	1	1	-	-	-	-	-	-	-	-
Exortishead	-	-	-	-	24	-	1	-	-	-	2	-	-	-	-	-	-	-	-
Exepton Mallet	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
Exreet	6	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-
Exaunton	199	4	4	1	1	1	5	-	5	1	6	-	-	-	-	-	-	-	-
Exatchet	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exellington	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exells	46	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exeston-super-Mare	209	8	1	-	-	6	10	-	1	2	8	-	-	-	-	-	-	-	-
Exeovil	410	3	3	-	-	1	-	-	1	-	7	1	-	-	-	-	-	-	-
RURAL DISTRICTS																			
Exsbridge	258	6	-	-	-	9	1	-	3	3	3	-	-	-	-	1	-	-	-
Exthavon	104	-	-	1	8	-	1	-	-	1	2	-	-	-	-	-	-	-	-
Exldgwater	223	2	3	-	-	11	2	2	-	-	2	1	-	-	-	-	-	-	-
Exard	64	-	-	-	-	1	2	-	-	-	3	-	-	-	-	-	-	-	1
Exutton	124	13	-	-	-	4	7	-	-	-	1	-	1	-	-	-	-	-	-
Exilverton	50	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-
Exome	85	5	-	-	-	10	6	-	-	4	1	-	-	-	-	-	-	-	-
Exngport	90	6	1	-	-	17	15	-	2	-	1	-	-	-	-	-	-	-	-
Exng Ashton	246	19	-	-	6	12	4	-	4	4	5	2	-	-	-	-	-	-	-
Exepton Mallet	22	1	-	-	3	-	-	-	-	-	1	1	-	-	-	-	-	-	-
Exaunton	199	7	2	-	3	6	1	-	-	-	-	2	-	-	-	-	-	1	-
Exellington	109	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
Exells	33	-	2	1	-	-	-	-	-	-	3	-	-	-	-	-	-	-	-
Exlliton	53	-	-	1	1	1	-	-	1	1	-	-	-	-	-	-	-	-	-
Exacanton	120	-	-	-	1	-	2	-	-	-	1	-	-	-	-	-	-	-	-
Exeovil	371	5	-	-	-	11	-	-	1	-	-	-	-	-	-	-	-	-	-
Urban Districts	1,804	38	22	1	30	18	18	-	9	10	35	5	-	1	-	-	-	3	-
Rural Districts	2,151	65	8	3	23	82	43	2	11	13	24	6	1	-	-	1	-	1	1
Administrative County	3,955	103	30	4	53	100	61	2	20	23	59	11	1	1	-	1	-	4	1
Comparative Figures for 1965	5,184	197	34	3	55	144	42	1	35	140	104	14	1	-	1	3	1	2	-

